

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MINNESOTA**

BKY No. 04-41707

-----  
In re:

Daniel J. Simon,

**AFFIDAVIT OF RANDALL L. SEAVER**

Debtor(s).  
-----

STATE OF MINNESOTA   )  
  ) ss.  
COUNTY OF DAKOTA   )

Randall L. Seaver, being first duly sworn, deposes

and states as follows:

1.       I was the Chapter 7 Trustee in the above case and have personal knowledge of the facts contained herein.

2.       Attached hereto as Exhibit 1 is a true and correct copy of the Debtor's Chapter 7 schedules and statement of financial affairs.

3.       Attached hereto as Exhibit 2 is a true and correct copy of the Rule 2004 examination of Daniel J. Simon conducted on September 22, 2004, together with exhibits 1, 2, 9 and 10 thereto.

4.       At the time this case was converted to a Chapter 13, I was completing the preparation of a turnover complaint against the Debtor. A true and correct copy of that draft is attached hereto as Exhibit 3.

5.       Based upon the testimony of the Debtor, and the documents which he produced, it appears to me that substantially all of the commissions received by the Debtor after commencement of the Chapter 7 bankruptcy case, and through August, 2004, the last date for which I have records, were generated by policies sold by the Debtor prior to commencement of the Chapter 7 bankruptcy case. Based upon bank statements provided by the Debtor pursuant

to subpoena, it appears that the Debtor received an average of in excess of \$3,400 per month in commission payments since commencement of this bankruptcy case.

6. It appears to me that administration by a Chapter 7 trustee of those continuing renewal and first year commissions would generate in excess of \$3,000 per month. It also appears to me that there is a cause of action against this Debtor for his use of those unscheduled assets during the course of his bankruptcy. Damages in the form of commission received post-petition, based on the documents in my possession, appear to be in excess of \$18,000 through August, 2004.

7. The Debtor received a \$690 property tax refund after commencement of the Chapter 7. The Debtor failed to turn that refund over to me.

8. It also appears that the Debtor, in the year prior to filing, paid over \$2,300 for his mother's nursing home expenses, an amount which may be recoverable by the estate.

9. Based upon the information now known to me, it appears to me that monies to be collected by the Chapter 7 estate from the Debtor and from insurance renewal and first year commissions on pre-petition policies would exceed \$25,000.

10. Attached hereto as Exhibit 4 is a true and correct copy of the proof of claim filed by FSR.

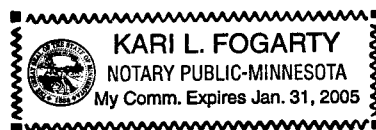
11. I have not yet received a copy of the Debtor's contract with Fidelity & Guaranty Life.

**FURTHER YOUR AFFIANT SAYETH NOT.**

Subscribed and sworn to before me this  
2nd day of November, 2004.

Kari L. Fogarty  
Notary Public

Randall L. Seaver  
Randall L. Seaver



In re **Daniel John Simon**  
Debtor

Case No. \_\_\_\_\_

## SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. (See Schedule D.) If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
<b>Homestead: Lot 33, Block 1, Vallee D'Or 1st Addition, Hennepin County, Minnesota.</b>		-	<b>180,000.00</b>	<b>0.00</b>
<b>(2004 tax estimated market value = \$179,000.00. 1/2 of townhouse used for petitioner's business.)</b>				

Sub-Total > **180,000.00** (Total of this page)

Total > **180,000.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re **Daniel John Simon**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE B. PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	<b>X</b>			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		<b>Wells Fargo Bank: checking account</b>	-	<b>13.00</b>
		<b>Wells Fargo Bank: business checking account (negative balance)</b>	-	<b>0.00</b>
		<b>Alliance Bank: personal checking account</b>	-	<b>5.00</b>
3. Security deposits with public utilities, telephone companies, landlords, and others.	<b>X</b>			
4. Household goods and furnishings, including audio, video, and computer equipment.		<b>Household goods and furnishings</b>	-	<b>5,000.00</b>
		<b>Household tools</b>	-	<b>10.00</b>
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<b>X</b>			
6. Wearing apparel.		<b>Clothing</b>	-	<b>500.00</b>
7. Furs and jewelry.		<b>1 watch</b>	-	<b>10.00</b>
8. Firearms and sports, photographic, and other hobby equipment.		<b>35 mm camera (20 years old)</b>	-	<b>1.00</b>
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<b>X</b>			

Sub-Total > **5,539.00**  
(Total of this page)

**2** continuation sheets attached to the Schedule of Personal Property



In re **Daniel John Simon**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE B. PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.		<b><i>Baird Keogh Retirement Plan (Not property of the estate, listed for informational purposes only.)</i></b>	-	<b>7,861.00</b>
		<b><i>Fidelity Magelin Profit Sharing Plan (Not property of the estate, listed for informational purposes only.)</i></b>	-	<b>40,365.65</b>
12. Stock and interests in incorporated and unincorporated businesses. Itemize.		<b><i>Interest in Midwest Insurance Brokers</i></b>	-	<b>1.00</b>
13. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
14. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
15. Accounts receivable.	<b>X</b>			
16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	<b>X</b>			
18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	<b>X</b>			
19. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	<b>X</b>			

---

Sub-Total > **48,227.65**  
(Total of this page)Sheet **1** of **2** continuation sheets attached  
to the Schedule of Personal Property

In re **Daniel John Simon**

Case No. \_\_\_\_\_

Debtor

## SCHEDULE B. PERSONAL PROPERTY

### (Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<b>X</b>			
21. Patents, copyrights, and other intellectual property. Give particulars.	<b>X</b>			
22. Licenses, franchises, and other general intangibles. Give particulars.	<b>X</b>			
23. Automobiles, trucks, trailers, and other vehicles and accessories.		<b>1997 Buick Riviera (100,000 miles; glove compartment needs repair \$225 est.; windshield wiper needs repair \$540 est.; starter needs repair \$470 est.; trunk release mechanism needs repair \$200 est.; damaged fender needs repair \$500; repair estimates by Jim Lupient Oldsmobile.)</b>	-	<b>4,000.00</b>
24. Boats, motors, and accessories.	<b>X</b>			
25. Aircraft and accessories.	<b>X</b>			
26. Office equipment, furnishings, and supplies.	<b>X</b>			
27. Machinery, fixtures, equipment, and supplies used in business.		<b>Tools of trade</b>	-	<b>500.00</b>
28. Inventory.	<b>X</b>			
29. Animals.	<b>X</b>			
30. Crops - growing or harvested. Give particulars.	<b>X</b>			
31. Farming equipment and implements.	<b>X</b>			
32. Farm supplies, chemicals, and feed.	<b>X</b>			
33. Other personal property of any kind not already listed.	<b>X</b>			

Sub-Total >	<b>4,500.00</b>
(Total of this page)	
Total >	<b>58,266.65</b>

Sheet **2** of **2** continuation sheets attached  
to the Schedule of Personal Property

(Report also on Summary of Schedules)

In re Daniel John Simon

Case No. \_\_\_\_\_

Debtor

**SCHEDULE C. PROPERTY CLAIMED AS EXEMPT**

Debtor elects the exemptions to which debtor is entitled under:

[Check one box]

- ☐ 11 U.S.C. §522(b)(1): Exemptions provided in 11 U.S.C. §522(d). Note: These exemptions are available only in certain states.
- ☒ 11 U.S.C. §522(b)(2): Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Market Value of Property Without Deducting Exemption
<b><u>Real Property</u></b>			
<b><u>Homestead: Lot 33, Block 1, Vallee D'Or 1st Addition, Hennepin County, Minnesota.</u></b>	<b>MSA §§ 510.01, 510.02 - homestead</b>	<b>180,000.00</b>	<b>180,000.00</b>
<b>(2004 tax estimated market value = \$179,000.00. 1/2 of townhouse used for petitioner's business.)</b>			
<b><u>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</u></b>			
<b><u>Wells Fargo Bank: checking account</u></b>	<b>MSA sec. 571.922 - 75% of wages</b>	<b>75%</b>	<b>13.00</b>
<b><u>Wells Fargo Bank: business checking account (negative balance)</u></b>	<b>MSA sec. 571.922 - 75% of wages</b>	<b>75%</b>	<b>0.00</b>
<b><u>Alliance Bank: personal checking account</u></b>	<b>MSA sec. 571.922 - 75% of wages</b>	<b>75%</b>	<b>5.00</b>
<b><u>Household Goods and Furnishings</u></b>			
<b><u>Household goods and furnishings</u></b>	<b>MSA § 550.37(4)(b) - household goods</b>	<b>5,000.00</b>	<b>5,000.00</b>
<b><u>Household tools</u></b>	<b>MSA § 550.37(4)(b) - household goods</b>	<b>10.00</b>	<b>10.00</b>
<b><u>Wearing Apparel</u></b>			
<b><u>Clothing</u></b>	<b>MSA § 550.37(4)(a) - clothing</b>	<b>500.00</b>	<b>500.00</b>
<b><u>Furs and Jewelry</u></b>			
<b><u>1 watch</u></b>	<b>MSA sec. 550.37 s. 4(a) - watch</b>	<b>10.00</b>	<b>10.00</b>
<b><u>Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans</u></b>			
<b><u>Baird Keogh Retirement Plan (Not property of the estate, listed for informational purposes only.)</u></b>	<b>MSA § 550.37(24) - retirement accounts</b>	<b>7,861.00</b>	<b>7,861.00</b>
<b><u>Fidelity Magelin Profit Sharing Plan (Not property of the estate, listed for informational purposes only.)</u></b>	<b>MSA § 550.37(24) - retirement accounts</b>	<b>40,365.65</b>	<b>40,365.65</b>
<b><u>Automobiles, Trucks, Trailers, and Other Vehicles</u></b>			
<b><u>1997 Buick Riviera (100,000 miles; glove compartment needs repair \$225 est.; windshield wiper needs repair \$540 est.; starter needs repair \$470 est.; trunk release mechanism needs repair \$200 est.; damaged fender needs repair \$500; repair estimates by Jim Lupient Oldsmobile.)</u></b>	<b>MSA § 550.37(12a) - motor vehicle</b>	<b>2,599.00</b>	<b>4,000.00</b>
<b><u>Machinery, Fixtures, Equipment and Supplies Used in Business</u></b>			
<b><u>Tools of trade</u></b>	<b>MSA § 550.37(6) - tools of trade</b>	<b>500.00</b>	<b>500.00</b>

0 continuation sheets attached to Schedule of Property Claimed as Exempt

In re **Daniel John Simon**  
Debtor

Case No. \_\_\_\_\_

## SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS, INCLUDING ZIP CODE	C O D E B T O R	H U S B A N D  W I F E  J O I N T  C O M M U N I T Y	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION IF ANY
			DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN					
Account No.			<b>LIEN ON</b>					
<b>Creditor #: 1</b> <b>FIRSTAR BANK</b> <b>PO BOX 790139</b> <b>ST LOUIS, MO 63179-0139</b>			<b>1997 Buick Riviera (100,000 miles; glove compartment needs repair \$225 est.; windshield wiper needs repair \$540 est.; starter needs repair \$470 est.; trunk rele</b>					
			Value \$ <b>4,000.00</b>				<b>1,401.00</b>	<b>0.00</b>
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					

0 continuation sheets attached

Subtotal  
(Total of this page)

**1,401.00**

Total  
(Report on Summary of Schedules)

**1,401.00**

In re **Daniel John Simon**  
Debtor

Case No. \_\_\_\_\_

## **SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name and mailing address, including zip code, and account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of this petition.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,650\* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(3).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,650\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to \$2,100\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

☐ **Alimony, Maintenance, or Support**

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

\*Amounts are subject to adjustment on April 1, 2004, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

In re **Daniel John Simon**

Case No. \_\_\_\_\_

Debtor

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBTOR H W J C	Husband, Wife, Joint, or Community	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>Creditor #: 1</b> <b>BARNA GUZY &amp; STEFFENS LTD</b> <b>400 NORTHTOWN FINANCIAL PLAZA</b> <b>200 COON RAPIDS BLVD</b> <b>MINNEAPOLIS, MN 55433-5894</b>		-				<b>1,300.00</b>
Account No. <b>Creditor #: 2</b> <b>ELAN MASTERCARD</b> <b>PO BOX 790408</b> <b>ST LOUIS, MO 63179-0408</b>		-				<b>15,920.00</b>
Account No. <b>Representing:</b> <b>ELAN MASTERCARD</b>		<b>ELAN FINANCIAL SERVICES</b> <b>PO BOX 108</b> <b>ST LOUIS, MO 63166-9801</b>				
Account No. <b>Creditor #: 3</b> <b>FIDELITY INVESTMENTS</b> <b>BANKCARD SERVICES</b> <b>PO BOX 15019</b> <b>WILMINGTON, DE 19886-5019</b>		-				<b>8,492.00</b>
Subtotal (Total of this page)						<b>25,712.00</b>

2 continuation sheets attached

In re **Daniel John Simon**  
Debtor

Case No. \_\_\_\_\_

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H U S B A N D W I F E J O I N T O R	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>Representing:</b> <b>FIDELITY INVESTMENTS</b>			<b>LTD FINANCIAL SERVICES</b> <b>7322 SOUTHWEST FREEWAY</b> <b>STE 1600</b> <b>HOUSTON, TX 77074</b>				
Account No. <b>Creditor #: 4</b> <b>FIDELITY INVESTMENTS</b> <b>BANKCARD SERVICES</b> <b>PO BOX 15019</b> <b>WILMINGTON, DE 19886-5019</b>		-	<b>CREDIT CARD</b>				<b>16,017.00</b>
Account No. <b>Representing:</b> <b>FIDELITY INVESTMENTS</b>			<b>HAROLD E SCHERR ESQ</b> <b>300 PRIMERA BLVD STE 356</b> <b>LAKE MARY, FL 32746</b>				
Account No. <b>Representing:</b> <b>FIDELITY INVESTMENTS</b>			<b>MBNA AMERICA</b> <b>PO BOX 15137</b> <b>WILMINGTON, DE 19886-5137</b>				
Account No. <b>Creditor #: 5</b> <b>FIRST NATIONAL BANK OF OMAHA</b> <b>PO BOX 2951</b> <b>OMAHA, NE 68103-2951</b>		-	<b>CREDIT CARD</b>				<b>22,710.00</b>
Sheet no. <u>1</u> of <u>2</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims <div>Subtotal (Total of this page)</div>							<b>38,727.00</b>

In re **Daniel John Simon**  
Debtor

Case No. \_\_\_\_\_

**SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	C O D E B O R	H U S B A N D W I F E J O I N T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
			DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.			<b>CONSUMER DEBT</b>				
<b>Creditor #: 6</b> <b>KNOX MECHANICAL</b> <b>710 PENNSYLVANIA AVE S</b> <b>GOLDEN VALLEY, MN 55426</b>		-					<b>273.00</b>
Account No.			<b>DEBT WITH PREVIOUS EMPLOYER</b>				
<b>Creditor #: 7</b> <b>LINCOLN HERITAGE LIFE INS</b> <b>4343 E CAMELBACK RD</b> <b>PHOENIX, AZ 85018</b>		-					<b>11,372.00</b>
Account No.			<b>CREDIT CARD</b>				
<b>Creditor #: 8</b> <b>SEARS</b> <b>PO BOX 105486</b> <b>ATLANTA, GA 30348-5486</b>		-					<b>538.00</b>
Account No.			<b>BUSINESS DEBT</b>				
<b>Creditor #: 9</b> <b>TRANSAMERICA LIFE INSURANCE</b> <b>CO</b> <b>4333 EDGEWOOD RD NE</b> <b>CEDAR RAPIDS, IA 52499</b>		-					<b>548.00</b>
Account No.							
Sheet no. <u>2</u> of <u>2</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							<b>Subtotal</b> (Total of this page)
							<b>12,731.00</b>
(Report on Summary of Schedules)							<b>Total</b> <b>77,170.00</b>



Case No. \_\_\_\_\_

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
--	--

In re **Daniel John Simon**

Debtor

Case No. \_\_\_\_\_

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years immediately preceding the commencement of this case.

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
------------------------------	------------------------------

In re Daniel John Simon  
Debtor

Case No. \_\_\_\_\_

## SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status:  <b>Single</b>	DEPENDENTS OF DEBTOR AND SPOUSE		
	NAMES <b>None.</b>	AGE	RELATIONSHIP
EMPLOYMENT: DEBTOR		SPOUSE	
Occupation <b>INSURANCE AGENT</b>			
Name of Employer <b>MID-WEST INSURANCE BROKERS</b>			
How long employed <b>SINCE 1980</b>			
Address of Employer <b>7527 HAROLD AVE GOLDEN VALLEY, MN 55427-0000</b>			

INCOME: (Estimate of average monthly income)

Current monthly gross wages, salary, and commissions (pro rate if not paid monthly)

Estimated monthly overtime

SUBTOTAL

LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

b. Insurance

c. Union dues

d. Other (Specify)

SUBTOTAL OF PAYROLL DEDUCTIONS

TOTAL NET MONTHLY TAKE HOME PAY

Regular income from operation of business or profession or farm (attach detailed statement)

Income from real property

Interest and dividends

Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

Social security or other government assistance

(Specify)

Pension or retirement income

Other monthly income

(Specify) **Average estimated gross income**

TOTAL MONTHLY INCOME

TOTAL COMBINED MONTHLY INCOME \$ **1,000.00**

DEBTOR

SPOUSE

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **1,000.00** \$ **N/A**

\$ **0.00** \$ **N/A**

\$ **1,000.00** \$ **N/A**

(Report also on Summary of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

**INSURANCE SALES HAVE BEEN SLOW SINCE 2001. HOME NEEDS REPAIRS: ALL CABINETS IN BATHROOMS NEED REPLACING; CARPETING ON UPPER FLOOR NEEDS REPLACING; INTERIOR NEEDS PAINTING. CAR NEEDS NUMEROUS REPAIRS. PETITIONER NEEDS DENTAL WORK.**

In re Daniel John Simon

Case No. \_\_\_\_\_

Debtor

**SCHEDULE J. CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)**

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home) . . . . .	\$	<u>0.00</u>
Are real estate taxes included? Yes _____ No <u>X</u>		
Is property insurance included? Yes _____ No <u>X</u>		
Utilities: Electricity and heating fuel . . . . .	\$	<u>171.00</u>
Water and sewer . . . . .	\$	<u>0.00</u>
Telephone . . . . .	\$	<u>0.00</u>
Other <u>Business &amp; personal phone lines \$192; Cable TV \$47</u> . . . . .	\$	<u>239.00</u>
Home maintenance (repairs and upkeep) . . . . .	\$	<u>150.00</u>
Food . . . . .	\$	<u>300.00</u>
Clothing . . . . .	\$	<u>150.00</u>
Laundry and dry cleaning . . . . .	\$	<u>15.00</u>
Medical and dental expenses . . . . .	\$	<u>250.00</u>
Transportation (not including car payments) . . . . .	\$	<u>250.00</u>
Recreation, clubs and entertainment, newspapers, magazines, etc. . . . .	\$	<u>10.00</u>
Charitable contributions . . . . .	\$	<u>100.00</u>
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's . . . . .	\$	<u>84.99</u>
Life . . . . .	\$	<u>0.00</u>
Health . . . . .	\$	<u>464.50</u>
Auto . . . . .	\$	<u>85.10</u>
Other <u>Mother's nursing home ins. \$194.12; E&amp;O ins. \$47.00</u> . . . . .	\$	<u>241.12</u>
Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) <u>Est. ongoing income taxes \$125.00; Property taxes \$167.79</u> . . . . .	\$	<u>292.79</u>
Installment payments: (In chapter 12 and 13 cases, do not list payments to be included in the plan.)		
Auto . . . . .	\$	<u>105.00</u>
Other <u>Association dues</u> . . . . .	\$	<u>175.00</u>
Other <u>Business expenses</u> . . . . .	\$	<u>100.00</u>
Other _____ . . . . .	\$	<u>0.00</u>
Alimony, maintenance, and support paid to others . . . . .	\$	<u>0.00</u>
Payments for support of additional dependents not living at your home . . . . .	\$	<u>0.00</u>
Regular expenses from operation of business, profession, or farm (attach detailed statement) . . . . .	\$	<u>0.00</u>
Other _____ . . . . .	\$	<u>0.00</u>
Other _____ . . . . .	\$	<u>0.00</u>
TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules) . . . . .	\$	<u><b>3,183.50</b></u>

**[FOR CHAPTER 12 AND 13 DEBTORSONLY]**

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income . . . . .	\$	<u>N/A</u>
B. Total projected monthly expenses . . . . .	\$	<u>N/A</u>
C. Excess income (A minus B) . . . . .	\$	<u>N/A</u>
D. Total amount to be paid into plan each _____ . . . . .	\$	<u>N/A</u>
(interval)		

**United States Bankruptcy Court  
District of Minnesota**

In re **Daniel John Simon**  
Debtor(s)

Case No. \_\_\_\_\_  
Chapter **7**

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **15** sheets *[total shown on summary page plus 1]*, and that they are true and correct to the best of my knowledge, information, and belief.

Date **March 23, 2004**

Signature **/s/ Daniel John Simon**  
**Daniel John Simon**  
Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court  
District of Minnesota**

In re **Daniel John Simon**

Debtor(s)

Case No.

Chapter

**7**

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

*DEFINITIONS*

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

**1. Income from employment or operation of business**

None

☐

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

**\$2,500.00**

**\$8,000.00**

**\$10,976.00**

SOURCE (if more than one)

**2004 YTD: Est. gross**

**2003: Adjusted gross est.**

**2002: Adjusted gross**

**2. Income other than from employment or operation of business**

None

☐

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

**\$0.00**

SOURCE

**See Question 10.**

**3. Payments to creditors**

- None ☐ a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within **90 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
<b>INTERNAL REVENUE SERVICE</b>	<b>2003 income taxes paid in January 2004.</b>	<b>\$1,800.00</b>	<b>\$0.00</b>

- None ☒ b. List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
--	-----------------	-------------	-----------------------

**4. Suits and administrative proceedings, executions, garnishments and attachments**

- None ☒ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
------------------------------------	----------------------	---------------------------------	--------------------------

- None ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
---	-----------------	--------------------------------------

**5. Repossessions, foreclosures and returns**

- None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
---	--	--------------------------------------

**6. Assignments and receiverships**

- None ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
------------------------------	-----------------------	-----------------------------------

- None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
----------------------------------	--	------------------	--------------------------------------

**7. Gifts**

- None ☐ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
<b>CHURCH</b>		<b><i>Within last 12 months</i></b>	<b><i>Approximately \$800.00.</i></b>
<b>JOYCE MEIER MINISTRIES</b>		<b><i>Within last 12 months</i></b>	<b><i>Approximately \$500.00.</i></b>

**8. Losses**

- None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
--------------------------------------	--	--------------

**9. Payments related to debt counseling or bankruptcy**

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
<b>CRAIG W ANDRESEN ATTY</b>	<b>3-23-04</b>	<b><i>\$209.00 court filing fee &amp; \$1,500.00 attorney fee</i></b>

**10. Other transfers**

- None ☐ List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
<b>a.) PETITIONER</b>	<b><i>Within last 12 months.</i></b>	<b><i>Baird Stocks of \$28,506.00 sold on July 20, 2003 &amp; IRA of \$2,278.00 cashed in at approximately same time; proceeds disbursed as follows: \$19,423.62 Associated Bank home equity loan balance paid off on July 31, 2003; kitchen home repairs totalling approximately \$9,300.00 made throughout Sept. - Nov. 2003; balance used for food, utilities, etc.</i></b>
<b>b.) FAMILY FRIEND</b>	<b><i>Within last 12 months.</i></b>	<b><i>Petitioner sold misc. rings for a total of \$1,500.00; proceeds used for living expenses.</i></b>



**11. Closed financial accounts**

- None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE AND NUMBER OF ACCOUNT AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
---------------------------------	--	------------------------------------

**12. Safe deposit boxes**

- None ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
<b>WELLS FARGO BANK</b>	<b>Petitioner</b>	<b>Papers only</b>	

**13. Setoffs**

- None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
------------------------------	----------------	------------------

**14. Property held for another person**

- None ☒ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
---------------------------	-----------------------------------	----------------------

**15. Prior address of debtor**

- None ☒ If the debtor has moved within the **two years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
---------	-----------	--------------------

**16. Spouses and Former Spouses**

- None ☒ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **six-year period** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME
------

## 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None ☒ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

- None ☒ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
-----------------------	---------------------------------------	----------------	-------------------

- None ☒ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
---------------------------------------	---------------	-----------------------

## 18 . Nature, location and name of business

- None ☐ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NAME	TAXPAYER I.D. NUMBER	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
<b>MID-WEST INSURANCE BROKERS</b>		<b>7527 HAROLD AVE GOLDEN VALLEY, MN 55427</b>	<b>Insurance agent; business operated out of home.</b>	<b>1980 to the present time</b>

- None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
------	---------

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

### 19. Books, records and financial statements

- None ☐ a. List all bookkeepers and accountants who within the **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS  
**GARY WEINBERG**

DATES SERVICES RENDERED  
**Past 20+ years.**

- None ☒ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME	ADDRESS	DATES SERVICES RENDERED
------	---------	-------------------------

- None ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME	ADDRESS
------	---------

- None ☒ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the **two years** immediately preceding the commencement of this case by the debtor.

NAME AND ADDRESS	DATE ISSUED
------------------	-------------

### 20. Inventories

- None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
-------------------	----------------------	---

- None ☒ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
-------------------	---

### 21 . Current Partners, Officers, Directors and Shareholders

- None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
------------------	--------------------	------------------------

- None ☒ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
------------------	-------	---

**22 . Former partners, officers, directors and shareholders**

None ☐ a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
------	---------	--------------------

None ☐ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
------------------	-------	---------------------

**23 . Withdrawals from a partnership or distributions by a corporation**

None ☐ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
---	-----------------------------------	--

**24. Tax Consolidation Group.**

None ☐ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER
----------------------------	--------------------------------

**25. Pension Funds.**

None ☐ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the **six-year period** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER
----------------------	--------------------------------

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date **March 23, 2004**

Signature **/s/ Daniel John Simon**  
**Daniel John Simon**  
 Debtor

*Penalty for making a false statement:* Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

1  
2 UNITED STATES BANKRUPTCY COURT  
3 DISTRICT OF MINNESOTA  
4 -----

5 In re:

6 Daniel J. Simon,

BKY No. 04-41707  
Chapter 7

7 Debtor.  
8 -----  
9

10 DEPOSITION and EXHIBITS of DANIEL J. SIMON,  
11 taken in the above-styled cause pursuant to Notice at Suite 132,  
12 12400 Portland Avenue South, City of Burnsville, County of  
13 Hennepin, State of Minnesota, before Kimberly K. Evavold,  
14 Registered Professional Reporter and notary public, on the 22nd  
15 day of September, 2004, commencing at approximately 1:00 p.m.  
16  
17  
18  
19  
20  
21

22 \* \* \*  
23  
24  
25

1 APPEARANCES:

2 CRAIG W. ANDRESEN, Attorney at Law, 2001  
3 Killebrew Drive, Suite 330, Bloomington, Minnesota 55425,  
4 appeared as counsel for and on behalf of Mr. Simon.

5 RANDALL L. SEAVER, Attorney at Law, FULLER,  
6 SEAVER & RAMETTE, P.A., Suite 132, 12400 Portland Avenue  
7 South, Burnsville, Minnesota 55337, counsel for and on  
8 behalf of the Trustee.

9  
10  
11  
12  
13  
14  
15  
16  
17 (Whereupon, the following proceedings were  
18 duly had, and entered of record, to-wit:)  
19  
20  
21  
22  
23  
24  
25

I N D E X

WITNESS

PAGE

DANIEL SIMON

Examination by Mr. Seaver

4

SIMON DEPOSITION EXHIBITS

MARKED

1 - Property Tax Refund Form

4

2 - Contract Agreement with Continental General

4

3 - Note from Mr. Simon re: Contract with F&G

4

4 - Contract with MidAmerica Mutual

4

5 - Contract with United American Insurance Company

4

6 - Contract with American Independent Indemnities

4

7 - American Independent Brokers Statements

4

8 - United American Renewal Statements

4

9 - Continental General Statements

4

10 - Mr. Simon's Bank Statements from 3/03 to 8/04

4

11 - Statements from Fidelity & Guarantee

4

12 - 5/13/04 Letter from Mr. Seaver to Mr. Andresen

4

13 - Schedules Filed in Bankruptcy Court

4

(Simon Deposition Exhibits 1 through 13  
were marked for identification by the  
court reporter and attached hereto.)

DANIEL SIMON,  
having been first duly sworn, was  
examined and testified on his oath as follows:

EXAMINATION

BY MR. SEAVER:

Q Would you state your full name, please?

A Daniel John Simon.

Q Mr. Simon, have you ever had your deposition taken before?

A No.

Q Just so you understand the way it goes, you understand you  
are under oath, right?

A Yes.

Q And I am going to ask you questions which you will be  
answering under oath, do you understand that?

A Yes.

Q If I ask you a question you don't understand, just tell me  
that and I will rephrase it, all right?

A Okay.

Q And try not to talk at the same time I do and I will do  
the same because she can only take one of us at a time,  
all right?

A Yeah.



1 Q The last thing, you have to answer orally.

2 A Yes.

3 Q So you have to say yes or no if it is a yes or no answer,  
4 don't use um-hmm or un-hnn, all right?

5 A Okay.

6 Q What is your occupation, Mr. Simon?

7 A I am an insurance agent.

8 Q What do you do as an insurance agent?

9 A Well, I run the insurance agency, I do the accounting and  
10 the bookwork, I do everything as the owner of the  
11 insurance agency, I solicit new business, I service old  
12 business and claim work, negotiate with insurance  
13 companies, everything that you do in a general insurance  
14 agency.

15 Q Are you the only employee of the insurance agency?

16 A At this time, yes.

17 Q And are you actually an employee; is that how you treat  
18 yourself?

19 A Well, I mean, I am an owner of it so it's a sole  
20 proprietorship.

21 Q It is not a corporation?

22 A No.

23 Q Okay. Did you review any documents in preparation for  
24 your testimony today?

25 A Yes, prior to coming here.

1 Q What did you review?

2 A The U.S. Bankruptcy Court.

3 Q The schedules?

4 A The schedules.

5 Q Okay. Anything else?

6 A Well, this (indicating).

7 Q There is a letter from me dated March 13, 2004?

8 A Yeah, that is this letter.

9 Q Okay. And here, let me just show you this, the letter

10 that you reviewed, it is the same as this, as what I have

11 marked as Exhibit 12, right?

12 A Yes.

13 Q Okay. I am showing you now what has been marked as Simon

14 Exhibit Number 1 and Simon Exhibit Number 1 is a copy of

15 two pages of a property tax refund form that you provided

16 to me and it indicates that you are entitled to a refund

17 of \$690. Have you received that refund yet?

18 A No.

19 Q Okay.

20 A Not to my knowledge.

21 Q Okay. When you get that check, send it to Mr. Andresen

22 and he will send it on to me, it is bankruptcy estate

23 property, okay?

24 A Okay.

25 Q I am showing you now what has been marked as Simon Exhibit

1           Number 2, and let's go off the record for a minute.

2                       (Discussion held off the record.)

3   BY MR. SEAVER:

4   Q       Do you recognize this Exhibit Number 2?

5   A       Yes, that is a contract between me and Continental General  
6           Insurance Company.

7   Q       All right. And this exhibit has control numbers on it,  
8           the numbers down on the bottom right we stamped on  
9           documents that you provided to us so that we knew what we  
10          had. And this exhibit contains documents bearing control  
11          numbers 1 through 17, you will see on the last page the  
12          17, it is up at the very top, stamped upside down.

13   A       The last page?

14   Q       Yeah, I just want to confirm that the last page has number  
15          17 at the top?

16   A       It is upside down, yeah, right, exactly, okay.

17   Q       And I think you just indicated this is the contract  
18          between you and Continental General Insurance Company?

19   A       Yes, that's right.

20   Q       Okay. And this is the contract by -- that governs the  
21          terms of your relationship with that company?

22   A       That is right, yes.

23   Q       Okay. Turn, if you would, to the page of this document  
24          that has control number 9 on it.

25   A       Yes.

1 Q And the page -- well, tell me what this page is, if you  
2 would?

3 A Well, it was the original schedule of commissions that  
4 come along with the contract.

5 Q Okay.

6 A Most of the business written it was Medicare supplement  
7 business and burial coverage with Continental General.

8 Q Okay. So what this schedule does is set out the  
9 commission you would receive for certain types of policies  
10 for certain time periods?

11 A That's correct.

12 Q Okay. Which category would most of these that you wrote  
13 fall into, the Medicare supplement?

14 A The Medicare supplement, yes, with that particular  
15 company, yes.

16 Q And the Medicare supplement, just so I understand what  
17 this schedule is saying, the Medicare supplement for the  
18 1st through the 6th year it says 23 there, does that mean  
19 you would get 23 percent of the premium for those years?

20 A Yes, on the -- on this year. But in subsequent years they  
21 decreased. They have the right to change the schedule  
22 every year and they decreased in subsequent years how much  
23 commission I get like it would be 18 percent for six years  
24 and so on and so forth.

25 Q Okay. So there would be amendments to this?

1 A Oh, yes.

2 Q Did I get those amendments from you?

3 A I think -- yes, I think -- well, I think you must have  
4 gotten some of those.

5 Q Okay.

6 A Or maybe they are -- I think they are probably in here.

7 Q If I didn't get them, though, you would provide them to  
8 me, right? Oh, go to the next to the last page of this  
9 exhibit, if you would, Mr. Simon, or actually the third  
10 from the last page there is a schedule of commissions for  
11 Medicare supplements there -- oh, that says that applies  
12 to Maryland though, I guess?

13 A Maryland, yeah.

14 Q Can you tell by looking at this Exhibit 2 that is in front  
15 of you what the later Medicare supplements percentage was?

16 A This was the original year because we were only paid that  
17 much that one particular year, then it decreased  
18 substantially.

19 Q Okay.

20 A It's listed -- the personal, when I wrote the supplements,  
21 is listed in the actual commission statements.

22 Q So when we look at those you will be able to tell?

23 A Absolutely.

24 Q Then at least according to the original contract, just to  
25 walk through this for the Medicare then, the 7th year and

1 after for policies written covered by this you would get  
2 7 percent?

3 A Yes, that hasn't changed, I don't believe, I think that is  
4 the same, they have kept that.

5 Q Okay.

6 A On all the preceding years after this.

7 Q Okay. In addition to Medicare what did you say the other  
8 primary thing was?

9 A Burial insurance, that would be life insurance.

10 Q Where is that on this schedule?

11 A Let's see here, I believe that's that first -- it says  
12 Universal there but.

13 Q You are at page 10, document control number 10?

14 A Right.

15 Q Okay.

16 A I believe that is under the life insurance part there, the  
17 whole life, because that's what they were, whole life  
18 program.

19 Q Okay.

20 A But it is 90 percent, it could have been 95 at this time  
21 and then when we -- we didn't write a whole lot of those  
22 until the last few years, the commission is 90 percent,  
23 but it states that on the commission statement as well.

24 Q Okay. So the way, at least according to this original  
25 contract --

1 A It was 95, but it is 90 when we actually wrote the life  
2 business.

3 Q So according to this contract, though, just so I  
4 understand the contract, you get 95 percent of the premium  
5 the first year and then 7 percent in subsequent years?

6 A Yes.

7 Q Okay. I am showing you now what has been marked as  
8 Exhibit Number 3 and Exhibit Number 3 is just a note from  
9 you that has control number 18 on it and this is you  
10 indicating that you are going to, in essence, provide me  
11 with a copy of a Fidelity & Guarantee life insurance  
12 contract once you receive it?

13 A Right.

14 Q And you haven't got it yet?

15 A Haven't got it.

16 Q When you get it you are going to send me a copy, or  
17 Mr. Andresen?

18 A Yes.

19 Q I am showing you what is marked as Deposition Exhibit  
20 Number 4. And Deposition Exhibit Number 4, can you tell  
21 me what that is?

22 A Well, this is Exhibit Number 3 here.

23 All right. This is an old contract with  
24 MidAmerica Mutual which there -- this goes back to 1996  
25 and there isn't any of their business even involved here.

1 Q Okay.

2 A That's why you didn't see a contract here.

3 Q I am showing you what is marked as Exhibit Number 5, this  
4 has document control numbers 22 through 28?

5 A Yes.

6 Q Can you tell me what this is?

7 A This is the original contract between myself and United  
8 American Insurance Company going back to 1981.

9 Q Okay. Were there subsequent amendments to this?

10 A You know, I don't believe there was, I don't believe there  
11 ever was.

12 Q Okay.

13 A We wrote a substantial amount of business with them from  
14 '81 through right up until '89 and then they got out of  
15 the Medicare supplement business of Minnesota.

16 Q So do you still receive any renewal commissions?

17 A Yes, those renewals were -- you have none of them through  
18 the bank records.

19 Q So the renewal commissions for United American Insurance  
20 Company would all be on policies sold from '81 to '89?

21 A On those original policies, yes. And I am getting  
22 continual renewal from those policies, that is what the  
23 money is that's coming in now is from.

24 Q Those are renewal commissions, right?

25 A That is right.



1 Q The person who holds the policy renews it and you continue  
2 to get a commission?

3 A That's correct.

4 Q Per the schedule?

5 A That's correct.

6 Q And would the schedule be the same as we see the schedule  
7 of commissions on the first page here?

8 A Well, that lists life insurance premiums there.

9 Q Look at page 26, if you would, control number page 26. Is  
10 that the commission schedule for the Medicare contracts?

11 A That is it, yes. I don't know that we ever got -- I don't  
12 think they can change that after it's written, they could  
13 change it for new years, but after '89 we wrote no  
14 business --

15 Q Okay.

16 A -- for them. That would be listed on our statements too,  
17 I mean, what exactly they were paying me.

18 Q Okay. I am showing you now what has been marked as  
19 Deposition Exhibit Number 6 and this has -- this is an  
20 exhibit that contains documents bearing control numbers 29  
21 through 39. Can you tell me what this is?

22 A This is the original contract between myself and American  
23 Independent Underwriters in 1982.

24 Q Was this ever amended?

25 A Well, there were -- this particular contract, I don't

1 believe it was.

2 Q Okay.

3 A I don't believe this particular contract was.

4 Q And what sort of insurance did you write through American  
5 Independent Underwriters?

6 A It was mostly medical which is listed on 39, which is a  
7 Medicare supplement policy and this amount of 20 and 10  
8 has not changed, as you can see, you can see that on their  
9 statements.

10 Q Okay. Are you continuing to sell any policies for them?

11 A No, they have no Medicare, they haven't had policies in  
12 Minnesota for many years now.

13 Q So when would you say the last policy that you sold was?

14 A Lord, it's been at least three, four years ago, I believe.

15 Q Okay. So the monies you are getting now from American  
16 Independent Underwriters, those are renewal monies?

17 A That is correct.

18 Q Okay. And it would be fair to say that for at least the  
19 last two years the only monies you have gotten from  
20 American Independent Underwriters are renewal monies?

21 A Oh, yeah, yeah.

22 Q Going back to Continental, are you writing policies for  
23 Continental now?

24 A No, I haven't -- well, in the last year I have written a  
25 few policies but it has been on the mates or the spouses

1 of persons that have had Continental General policies with  
2 me in prior years. That particular Medicare supplement  
3 has gotten very expensive and it is not sellable to market  
4 anymore.

5 Q The people who would purchase those policies from you  
6 before, were they locked into a certain price?

7 A Well, no, but the price would go up yearly and those  
8 people that have retained it have chose to do so because  
9 it is a good policy, so on and so forth.

10 Q Okay.

11 A But it is not sellable as far as new persons coming in  
12 because of the competition, there is too much competition  
13 that would equal coverage for less money.

14 Q Okay. The United American Insurance Company commissions  
15 that you received, would it be accurate to say that for at  
16 least the last two years the commissions you have received  
17 from there have all been renewal commissions?

18 A Oh, yeah, I don't remember any new business there at all.

19 Q Okay. I am showing you now what has been marked as -- I  
20 am showing you Simon Exhibit Number 9. And Exhibit Number  
21 9 is a group of statements stapled together that you  
22 provided to me for Continental General Insurance Company?

23 A Yes.

24 Q And this exhibit has documents bearing control numbers 101  
25 through 128 and you provided me with more statements than

1           there are here that I have, but I have just taken out some  
2           of them for a time period.

3     A       Okay.

4     Q       Let's go to the first page after the cover page here of  
5           this exhibit, which would be control number 102, do you  
6           have that in front of you?

7     A       Yes.

8     Q       Okay. I would like to go through this so you could  
9           explain to me what this means. Let's start with the first  
10          person there, M. Basel?

11    A       Yes.

12    Q       The first column is the policy number, right?

13    A       Yes, that is correct.

14    Q       And then M. Basel is the name of the person with the  
15          policy?

16    A       Yes.

17    Q       And this is a life policy, right?

18    A       Yes, it says type of policy, life, yeah.

19    Q       And then what is the COM, the mode, do you know?

20    A       Oh, COM, that is the automatic monthly. It is a monthly,  
21          yeah, that's got to mean monthly there because if you go  
22          down further to V. Olson it says QTR which means  
23          quarterly.

24    Q       Okay.

25    A       So that is a monthly.

1 Q And M. Basel it also says first year there in the  
2 description section?

3 A Yes.

4 Q What does that mean?

5 A This was recently written so I am still in the first year  
6 of commissions where I would be getting the larger amount.  
7 If you go over to commissions next to -- the next column  
8 there is ANN/issue date that means anniversary issue date.  
9 It is 9-03 so on 9-04 of this year the 90 percent  
10 commission will drop down to that lesser commission.

11 Q Okay, got it. And then still following that same line  
12 over for M. Basel right now the first year the commission,  
13 right, is 90 percent?

14 A Yes, that would be 90 percent of 37.53 which they say in  
15 the next columns are credits, would be that \$33.78.

16 Q Okay. Hang on a minute, the column that says  
17 premium/commission amount that says 37.53, right?

18 A Yes.

19 Q Is that the monthly payment?

20 A That is their actual monthly payment, yes.

21 Q Then when you get to the credit column what does that  
22 mean?

23 A That is the 90 percent.

24 Q Okay.

25 A My commission amount.

1 Q Got it. So then you go over to the amount due agent --

2 A 33.78, yes.

3 Q You have to try not to interrupt me. Go back to the  
4 column that says anniversary date, month and year and if  
5 we go down that column there are, well, the ones that have  
6 the anniversary date of 10-03 that means the first year is  
7 up then, or 10-04, correct?

8 A Yes, that would be correct.

9 Q Then when you get to down to E. Drews it says 1-04, would  
10 that mean that the policy was written in January of 2004?

11 A Yes.

12 Q Okay. And then Meissner at 6-04, that was written in June  
13 of this year?

14 A That is correct.

15 Q Okay. After G. Meissner, which says that it is a life  
16 policy, then after that it says it has an indication of  
17 352 on it for several people, what does 352 mean?

18 A 352 is a Medicare supplement, that is the type of policy  
19 in that column, the 352 is a Medicare supplement. If you  
20 also look above that like under Meissner it says life  
21 because that's a life insurance policy.

22 Q Okay. And if we went back, I will just show you my copy  
23 of Exhibit 2, the next to last page down in the Medicare  
24 supplement section they are talking about forms, do those  
25 tie in?

1 A That's a different state.

2 Q Oh, it is?

3 A Yeah, that's for Maryland. But they usually have -- the

4 form numbers are always listed here and they change that

5 or they have their right to change that every year.

6 Q Okay. But the 352 does mean Medicare coverage?

7 A Medicare supplement, yes.

8 Q Turn to page 9 of number 2.

9 A Yes.

10 Q And that indicates form 351 and 352?

11 A Yes.

12 Q Tell me this, M. Basel, what does M. stand for?

13 A That's her first name.

14 Q When is the last time you spoke with her?

15 A M. Basel?

16 Q Yeah.

17 A Oh, Lord, I -- M. Basel --

18 Q Let's make it easier, the policy was written in September

19 of 2003, have you spoken with her since then?

20 A I can't truthfully say that I haven't because we get a lot

21 of calls, you know, that they will forget their benefits

22 or they will want to -- like change of a bank account or

23 something like that, but to my knowledge I can't recall

24 any conversations with her after the policy was delivered.

25 Q Okay. What about C. Ellis, this is the next one there,

1           that shows a 9-03 date for the policy, have you had any  
2           contact with C. Ellis since then?

3     A       I can't recall.

4     Q       You don't recall whether you have or haven't?

5     A       No, because, I mean, we have hundreds of clients.

6     Q       When you say "we" who do you mean?

7     A       Well, my business.

8     Q       Okay. Nothing that you recall but there may have been  
9           some contact?

10    A       There may have been like for some minor service work or  
11           something like that or they call in with questions, there  
12           are so many -- it is a daily thing so I can't really --  
13           then there is all the new people that we are dealing with  
14           too, so it would be difficult to remember.

15    Q       Okay. Well, look at the names first on the same page that  
16           we are on here, page 102, look at all the life insurance  
17           there, except for G. Meissner all of the other names there  
18           for the life insurance, do you recall any contact with  
19           those people in the last, oh, well, since the policy was  
20           written?

21    A       Well, I know Drews called once, I remember that, as a  
22           matter of fact. They called but it was just like a  
23           question that was answered over the phone, I remember  
24           that.

25    Q       Okay.



1 A I think Mrs. Foss called once and it was a similar type  
2 thing but that -- the rest I really can't state for sure.

3 Q Okay. And then go down to the 352 policies.

4 A Um-hmm.

5 Q Do you recall any contact with any of those people from,  
6 let's say, January of 2004?

7 A Oh, Lord, I really couldn't tell you, Mr. Seaver, because  
8 I mean if you look at all of them here, there is pages of  
9 them, you know, I don't know how many clients we have here  
10 and there's different ones that come in every month, see,  
11 I can't really.

12 Q What do you mean different ones come in each month?

13 A A lot of these are monthly but some of these people pay  
14 quarterly or annually so, I mean, the same names would not  
15 appear every month, you know, that would be different  
16 names coming in every month on the statement.

17 Q When they make their payments do they make them to you?

18 A Oh, no, they send -- the only check that would be  
19 accompanied to me is with the original application made  
20 out to the company.

21 Q On or about, okay. But back to my question on page 102  
22 here, and I am restricting it to that page for now, the  
23 352 people, the 352 policies there, my question was do you  
24 recall any contact, direct contact with those people that  
25 you have had since January of this year?

1 A New people with the Medicare supplement.

2 Q Are these new people here?

3 A No, I don't think so, no.

4 Q Okay.

5 A But if you look at that issue date for the 352s they all  
6 go back to --

7 Q There is one that is the first year, isn't there, 7-04  
8 there?

9 A 7-04 is new, yeah, that's Mr. Steele. Her husband is  
10 right above there, if you look above -- she is R. Steele,  
11 he was E. Steele, now there is an example there of where  
12 he was with us and then she wanted to join because he was  
13 so happy with the policy.

14 Q Okay. Here, let me ask my question again on page 102 for  
15 the people that have the 352 policies, the renewal people  
16 that have the 352 policies, do you recall any contact  
17 between you and them since January 1 of 2004?

18 A Well, I mean, it would be R. Steele because we wrote that  
19 this year.

20 Q Yep, other than that one, the renewal policies is what I  
21 am talking about.

22 A Oh, well here, it would be the same situation with the  
23 life, you know, when they call in for are we covered on  
24 this or so on and so forth.

25 Q There might have been calls but you --

1 A Oh, yeah.

2 Q You got to let me finish the questions. There might have  
3 been calls but you don't remember specifically?

4 A No.

5 Q Go to the second page of the statement which has control  
6 number 103 on it and take a minute to look at this page  
7 and the anniversary issue column and just confirm that  
8 everything on here is a renewal commission?

9 A Yes.

10 Q Okay. And as far as any contact between you and these  
11 people from January 1 of 2004 to now, would your answer be  
12 the same as previously, there may have been but you don't  
13 recall?

14 A Yes, I mean, it wasn't anything extensive but the claims  
15 are handled directly or automatically, so there isn't like  
16 claim work to do on these policies.

17 Q Okay. And then go to page 104 here and those are all --  
18 the type of policies here are all 352 and these are all  
19 renewal commissions as well on this page, correct?

20 A Yes.

21 Q And do you recall from January 1 of 2004 any contact with  
22 these people?

23 A No.

24 Q Let's go to the next page of this exhibit, we are in the  
25 month of 7-04 now, that's what it says up where it is

1           circled, correct?

2     A       Right.

3     Q       Now for the month, for instance, of 7-04 when would you  
4           actually get your commission checks from Continental  
5           General?

6     A       For the month of July I would get that on the first part  
7           of August.

8     Q       Okay. So for the August one that we just looked at you  
9           got that in the first part of September?

10    A       That's correct.

11    Q       Okay. And then for September you will get the checks in  
12           the first part of October?

13    A       That is correct, yeah.

14    Q       Have you received your September statement yet?

15    A       For --

16    Q       Continental General?

17    A       For the month of September?

18    Q       Yeah.

19    A       No, that is impossible, we will have to be at least to the  
20           second or the -- the second business day of the month  
21           before that's possible because they would have to do the  
22           accounting from the previous month before they could tell  
23           us anything.

24    Q       Okay. Go back to the month of July 2004 again and I am on  
25           page 105 which is the first page of that statement.

1 A July?

2 Q Yeah, month of 7-04.

3 A All right.

4 Q It is control number 105.

5 A Yeah, I am there now.

6 Q If you look at the anniversary date column there are the  
7 two G. Meissner entries for the same policy that say 6-04  
8 on them, correct? Well, do you see that?

9 A Yes.

10 Q Okay. Other than the G. Meissner entries it's accurate to  
11 say that all of the policies on this page for which you  
12 were receiving commissions were written before March of  
13 2004, correct?

14 A Yes.

15 Q Okay. And go to the second page of this statement which  
16 has control number 106 on it.

17 A Yes.

18 Q And looking at that anniversary issue date column again,  
19 all of the policies on this page for which you were  
20 receiving renewal commissions were written before March of  
21 2004, correct?

22 A Yes.

23 Q And on the third page of this July statement which is  
24 document control number 107 all of the commissions there  
25 were for policies written before March of 2004, correct?

1 A Yes.

2 Q Okay. What do you do with respect to those policies that  
3 you are getting renewals, I mean, do you have any work  
4 involved with those policies?

5 A Oh, yeah, I do when they call in or if there is a question  
6 I go out or that's why we are paid the renewal is to  
7 service them.

8 Q But you don't, other than when you have testified, you  
9 don't really have contact with these people?

10 A Well, there will be things like if they change a bank  
11 account we have to send out new forms to have them sign or  
12 if there is mistakes or something like that, those things  
13 most certainly happen, who and when I don't really keep a  
14 record.

15 Q So you don't have any records that would reflect any  
16 purported servicing by you of these contracts on which you  
17 are getting renewal commissions?

18 A Unless there was paperwork involved like the sale of a new  
19 policy or something like that.

20 Q Okay. But as far as calls coming in or you do something  
21 after the sale there isn't any record of that?

22 A No.

23 Q Do you have an understanding of what would happen if you  
24 died, what would happen to your renewal commissions?

25 A I believe they are paid to my next of kin, I believe, but

1           that really --

2     Q       It's covered by the contract, right?

3     A       I can't honestly state that because, you know, that's been  
4           a long time since I even had an interest in that.

5     Q       Here, let me -- I am putting Exhibit Number 2 in front of  
6           you.

7     A       Okay.

8     Q       And I have turned it to page 8 which is entitled vesting  
9           or I turned it to the page which has Section 8 which is  
10          entitled vesting compensation after termination and that  
11          talks about, among other things, what would happen in the  
12          event of your death or your total disability, correct?

13    A       Yes.

14    Q       So there is a contract provision that concerns what would  
15          happen if you, in fact, did die, right?

16    A       Yes.

17    Q       Let's go back now, well, here, let me go back for a couple  
18          more questions here and obviously if you did die you  
19          wouldn't be answering any of these follow-up calls by your  
20          customers?

21    A       No.

22    Q       Let's go back, now, to Exhibit Number 9 which is the  
23          commission statements from Continental and I just want to  
24          go through one more set of them, I think. Go to the one  
25          for the month of 3-04.

1     A     Okay.

2     Q     And that's -- it starts at control 119?

3     A     Yes.

4     Q     Do you have that in front of you?

5     A     Yes, 119.

6     Q     Okay. And on that page, 119, all of the commissions paid  
7           there are paid on account of policies sold before March of  
8           2004, correct?

9     A     Well, yes, there's one here for January of '04 and then  
10          February of '04.

11    Q     Right.

12    A     That's correct.

13    Q     So they are all for policies sold before March of 2004,  
14          correct?

15    A     That's correct, yes.

16    Q     And the second page of this statement which is control  
17          number 120, all of the renewal commissions paid per that  
18          page are for policies sold before March of 2004?

19    A     Yes.

20    Q     And then at control number 121, the last page, here all of  
21          the commissions paid from that page are for policies sold  
22          before March of 2004?

23    A     That is correct.

24    Q     Okay. And in addition to these monthly statements for  
25          Continental General -- oh, let me rephrase that question.



1           How are your commissions paid from Continental General?

2    A       They are electronically sent right to my checking account.

3    Q       Okay. I am putting in front of you or I am about to put

4           in front of you what is marked as Exhibit 10 and can you

5           tell me what Exhibit Number 10 is?

6    A       My bank statements from 3-03 to 8-04.

7    Q       Okay. And this document, this exhibit has control numbers

8           on it of 234 through 277, correct?

9    A       What?

10   Q       277 I have, or I'm sorry.

11   A       Yes, 277 that's correct.

12   Q       Okay. Turn to page 266 if you would.

13   A       Yes, that's 4-04.

14   Q       And going back at the same time to Exhibit Number 9, I've

15           turned Exhibit Number 9 to page 121.

16   A       Okay.

17   Q       And at page 121 it has the direct deposit amount on it of

18           \$2,127.49, correct?

19   A       Yeah. And that was at page --

20   Q       It's 266.

21   A       Yes, that is it.

22   Q       And you see that direct deposit made on April 5 into your

23           account?

24   A       Yes, that is right.

25   Q       There is also an April 12 deposit and this is again at

1 control number 266, Exhibit 10, and it says F&G life agent  
2 payment, that would be a payment, then, from F&G?

3 A Fidelity & Guarantee, that's correct.

4 Q Is it accurate to say there is just one payment a month  
5 from Continental?

6 A There's one, just one.

7 MR. ANDRESEN: I'm sorry to interrupt, I need  
8 to go to the men's room for a second, is it okay if we go  
9 off the record for a second and cease the examination  
10 until I come back?

11 MR. SEEVER: Yes, it is.

12 (Break taken from 1:53 to 1:55 p.m.)

13 BY MR. SEEVER:

14 Q I am showing you now, Mr. Simon, what has been marked as  
15 Simon Exhibit Number 7 and Simon Exhibit Number 7 has  
16 control numbers 64 through 72 on it?

17 A Yes.

18 Q Can you tell me what this is?

19 A These are statements from American Independent Brokers.

20 Q Okay.

21 A The check is made from GoldenCare, which is one of our  
22 major carriers now, but that wasn't who most of this  
23 business that you see here is from, that original medical  
24 company.

25 Q Okay. Turn to the page, the second page of this exhibit

1           which has control number 65 on it.

2     A       Yes.

3     Q       And going through here it has a date up on the top left  
4           that says 8-20-04, correct?

5     A       Yes.

6     Q       Is that your handwriting that says for 7-04?

7     A       That is right.

8     Q       So what's this page?

9     A       This is the renewal statement for July of this year.

10    Q       Okay.

11    A       And the check -- the blank space you see there is a check  
12           stub for that amount of 151.

13    Q       Okay. And to walk through this statement, there's an  
14           agent number, there's a policy number, and then there's a  
15           form column, do you know what that form column is?

16    A       That's the form, each policy in the State of Minnesota is  
17           assigned a form number, like the first one is 992MN.

18    Q       Then the name column, that is the name of the  
19           policyholder?

20    A       That is the name of the individual, yes.

21    Q       And then the issue date, is that the issue date of the  
22           policy for which the commission is being paid?

23    A       Yes.

24    Q       Okay. And what sorts of policies are these that are on  
25           this page?

1 A Well, those first two would be Medicare supplements, that  
2 third one with Hatlevig -- the third one, Hatlevig is a  
3 life insurance policy and the fourth one under Jones is a  
4 nursing home policy.

5 Q Okay. Have you talked to any of these people, Amber,  
6 Ogilvie, Hatlevig or Jones since January of this year?

7 A Yeah, I have talked to Jones and I don't know for sure if  
8 it was Amber or not but it was somebody else with these  
9 older policies.

10 Q Okay. Now take a minute to go through these if you need  
11 to, Mr. Simon, but I want you to look at these statements  
12 for all of these pages through page number 72 and I just  
13 want you to confirm this for me, all of the commissions  
14 reflected on those pages are reflected for policies that  
15 are written prior to January of 2004, correct?

16 A Oh, sure, yes. Yes, very definitely.

17 Q Okay. I am showing you now what has been marked as  
18 Deposition Exhibit Number 8. And Deposition Exhibit  
19 Number 8 is a group of documents stapled together bearing  
20 document control numbers 73 through 100.

21 A Yes.

22 Q And can you tell me what these are?

23 A These are United American renewal statements that we get  
24 monthly also.

25 Q Okay. And turn to the first or it would be the second

1 page of this exhibit, the first statement page, or  
2 actually let's go back in this exhibit, Mr. Simon, to page  
3 number 94.

4 A Back to page 94?

5 Q Yeah.

6 A Okay.

7 Q All right. Now, page 94 says at the top that it is a  
8 statement for March of 2004, correct?

9 A Yes.

10 Q And let's go down to about the middle of the page where  
11 you see the name Harmeyer, Allison and Madsen, Dorothy, do  
12 you see that?

13 A Yes.

14 Q And these are health policies, all three of these that are  
15 in this section, correct?

16 A The one -- the two on the bottom are Medicare supplements  
17 and the one above that is a hospital indemnity policy.

18 Q Okay.

19 A But I just happen to remember that.

20 Q Okay. And then the months, it says months, due date, what  
21 do those mean?

22 A Months means how long they have made, like that first one  
23 says 01, that is for one month, then those two underneath  
24 that say 06, that means six months.

25 Q Okay.

1 A And the due date there is when it is actually due.

2 Q Okay.

3 A And the next column says issue, that's the date that it  
4 was actually issued. Like Emma Leinonen it was in May of  
5 1981.

6 Q Okay. So the issue column, that is when the policy was  
7 written?

8 A That's right.

9 Q Okay. And then if you go to the bottom of this same page,  
10 94, there are some other -- are these other policies down  
11 at the bottom?

12 A No, those are claims, those are claims that they have  
13 paid.

14 Q Okay.

15 A Yeah, it says benefits paid, payment type, right.

16 Q Okay. Do the amount of benefits paid have any correlation  
17 or do they affect your commission in any way?

18 A No, no.

19 Q Okay. I am showing you now what has been marked as  
20 Exhibit Number 11 and Exhibit Number 11 is a group of  
21 documents stapled together and the first one has control  
22 number 279 and then it goes to 442 because I took out some  
23 of the older statements. And then it goes from 442  
24 through 520. And turn, if you would, to the page  
25 Mr. Simon, that has control number 460 on it, four, six,

1           zero.

2    A       Yes.

3    Q       Can you tell me what this four, six, zero is?

4    A       Well, this is a payment from Fidelity & Guarantee, they

5           sent this electronically to me on the date indicated and

6           then they sent me this copy of it.

7    Q       Okay. And then does the next page after this, page 461,

8           is that the backup?

9    A       That's the outline of what the payment was for.

10   Q       Okay. Let's go to 461 then and go through this.

11   A       Okay.

12   Q       Starting at the top where it says Vu, is that a name?

13   A       Yes, that is, that is a first name.

14   Q       That's --

15   A       It is a first name. That was an oriental person.

16   Q       Okay. So let's go across these columns and tell me what

17           they mean.

18   A       Well, in the second column you have the LOO number, that

19           is the policy number.

20   Q       Okay.

21   A       And then in the next column there you've got 56 and under

22           it M, that's their age like that first person is a male.

23   Q       Yep, okay.

24   A       You could follow that all the way down. The next column

25           says ten year, that's a te-year program.

1 Q What column are you on?

2 A Well, I don't know if you have got the same thing I do.

3 You see here, it says 10 year.

4 Q Oh where it says 10RTG?

5 A That's right, that means -- these are life insurance  
6 policies and they are mortgage protection coverages so  
7 they are geared to run with their mortgage of ten years.

8 Q Then that next column, what is that?

9 A That is the policy -- or that is the -- oh, that's the  
10 processing date, yeah, March 25, 2004.

11 Q That's just the processing date?

12 A Processing date, yeah.

13 Q For this check?

14 A Or for that, yes.

15 Q Okay.

16 A Or that's when they received it, it's actually completed  
17 when they write the check.

18 Q Can you tell from any of these columns when these policies  
19 were written?

20 A No.

21 Q Do you know from your own recollection when these policies  
22 were written?

23 A No, I would have that on the actual commissions, but they  
24 aren't considered, it isn't considered commission until  
25 the policy is actually finalized at the underwriting



1 department because maybe they might cancel or be rejected,  
2 see. So if I wrote a policy today on any one of you and I  
3 sent it in to them, the money that you sent along with it,  
4 they would not pay commissions on that until the policy  
5 was actually finalized.

6 Q Okay. So there isn't any way as we sit here today that  
7 you can tell me the date that these policies were written?

8 A No.

9 Q Can you tell me if they were before January of 2004?

10 A Oh, no, no, it would be in the month or two prior to this.

11 Q Okay.

12 A Because the general amount of time to find out whether  
13 they've made the underwriting or not is four to six weeks.

14 Q Okay. Turn to page 460 for just a minute, the page before  
15 this.

16 A Yes.

17 Q And that's indicating in the column, the commission  
18 statement column they have a first year and a renewal  
19 section, do you see that?

20 A What page are we on?

21 Q I am at 460, I am right in -- I am trying to figure out  
22 what those columns mean (indicating).

23 A Oh, oh, I see. The first year means the first year  
24 commission. The renewal commission you see there would be  
25 just that, those amounts of 2.05 would be on policies that

1 are past that first year.

2 Q Okay. So where it says here year to date, first year  
3 \$2,437.36, what does that figure mean?

4 A That's the total amount that I had earned.

5 Q Okay. Then how does it come out to be this \$464.23 that  
6 the check is for?

7 A Um-hmm.

8 Q Where do we see the components of that on the second or on  
9 461, page 461, is that where we see those?

10 A (No response.)

11 Q Do you understand my question?

12 A Just a moment here.

13 Q Okay.

14 THE WITNESS: Can I use your pencil for a  
15 moment?

16 MR. ANDRESEN: Sure.

17 THE WITNESS: Do you mind if I write on this?

18 MR. ANDRESEN: Go right ahead.

19 THE WITNESS: I am a little bit unclear on it  
20 myself.

21 Yeah, I can explain that. I just wanted to  
22 make sure because I haven't messed with this for quite a  
23 while. The actual commission amount was \$462.18.

24 BY MR. SEAYER:

25 Q Okay.

1 A But you see here there's other commissions underneath  
2 that, right here for Estrada, Farr and Farr.

3 Q Yep.

4 A Now, they are carrying that over, that didn't appear in  
5 this column here, it appeared in the last column and those  
6 amounts amount up to \$2.05. That was subtracted out of  
7 here. They sent me a check for \$264.23 and that amount  
8 was added onto this 262.18.

9 Q Or 462.18?

10 A Yeah, to give you 464.23.

11 Q Okay.

12 A That's what that \$2.05 difference was.

13 Q Okay.

14 A Because that was business written, that is renewal  
15 commission.

16 Q Okay. Let's go now, on this same exhibit, go to page 463.

17 A Okay.

18 Q On 463 that's -- well, tell me what that is.

19 A This is another commission check for \$379.39.

20 Q Okay. And I am showing you, I have opened Exhibit Number  
21 10, which is your bank statements, to page 266. And there  
22 is a check for 300 -- or direct deposit for \$379.39 on  
23 April 5, correct?

24 A Yes, that's correct.

25 Q Would it be accurate to say that that check was for

1 commissions on policies that were all written before  
2 January 29 of 2004?

3 A January 29?

4 Q I am sorry, I misspoke, would it be accurate to say that  
5 that \$379.39 was represented commissions for policies  
6 written before March 29 of 2004?

7 A Yes.

8 Q Okay. Turn, if you would, to page 467 and that's in  
9 Exhibit 11.

10 A Okay.

11 Q And that's another check or it's a copy of a direct  
12 deposit slip for \$815.04, correct?

13 A That is correct, yes.

14 Q We see that going into your account here on page 266 of  
15 your bank statement, Exhibit 10, correct?

16 A That is right.

17 Q And that would involve, then, commissions for policies  
18 written before March 29 of 2004, correct?

19 A That's correct.

20 Q And if you go to page 469 there is evidence of direct  
21 deposit there, \$173.68, do you see that?

22 A Um-hmm.

23 Q Yes, that is a yes?

24 A Yes.

25 Q Okay. And that's again all for commissions for policies

1 written before March 29 of 2004?

2 A That's correct, yes.

3 Q Looking at your bank statement in April for a minute,  
4 there is another April 26 F&G life agent payment of \$763?

5 A That could have been written in April, in the month of  
6 April.

7 Q Okay. Well, turn to page 473.

8 A Okay.

9 Q There's evidence of that direct deposit there of 763.09?

10 A That is correct.

11 Q That would be for commissions of policies written before  
12 March 29, 2004?

13 A Well, this is getting towards the end of April, see, so it  
14 could have been written in April.

15 Q Okay. There could be some in there?

16 A Absolutely.

17 Q You would have those records at your office that we could  
18 determine when the policy was written?

19 A Oh, let's see, the names are on here.

20 Q Okay.

21 A Duerr, Wasti.

22 Q Would it be accurate to say if we are seeing any name up  
23 here in let's just say the March statements and we see the  
24 name also appearing in statements before that we would  
25 know that the policy had been written before that, right?

1 A Can I ask you to say that again?

2 Q Yeah. Let me try to make it a little easier to  
3 understand. Let's look at the April statement and let's  
4 go to page -- okay, let's go to page 478.

5 A Okay.

6 Q Okay. Now at page 478 if you look over there you see two  
7 references to Vu and there's also a reference to Estrada,  
8 correct?

9 A Yes.

10 Q Okay. And now go to page 461 which is a March statement.

11 A Yes.

12 Q And there we see a reference to Vu and references to  
13 Estrada, correct?

14 A Right.

15 Q So if I were to look at an April statement or even a May  
16 statement and I see a name appearing there for a  
17 commission and I see that name also back in March it would  
18 be fair to conclude that the policy had to have been  
19 written by March, correct? Do you understand what I am  
20 asking you?

21 A (No response.)

22 Q Let me try to rephrase it. If I see a name, if you are  
23 getting -- let's just say for instance in June you are  
24 getting paid a commission on the Vu policy.

25 A Right.

1 Q And I can also see that same Vu policy showing up on your  
2 commission statement in March of 2004 that would indicate  
3 that the policy had been written by March of 2004,  
4 correct?

5 A Yes.

6 Q Okay. And it would be the same for all names applying  
7 that analysis, right?

8 A Well, yeah, if they were written at least a couple of  
9 months before the date of the actual. The only way you  
10 would know for sure is to determine whether it was  
11 renewable as they were paying or first year.

12 Q But the first year, of course, goes on for a whole year?

13 A No, no, not with Fidelity.

14 Q Tell me how it goes with Fidelity.

15 A Fidelity pays me in this manner. Say that the premium  
16 would work out to be, oh, just \$1,000 per year, they would  
17 owe me 75 or 80 percent of that which would be \$800. They  
18 would pay me right away 80 percent of that which would be  
19 \$640, then the balance of that \$160 still owing would come  
20 to me in the last three months following that.

21 Q Okay.

22 A This is all I would be paid on that business for nine  
23 months and then in the 10th, 11th and 12th month I would  
24 get the balance of that \$800 which would be \$160. That is  
25 where you are seeing this renewal commissions come in.

1 Q So if, for instance, just to help me try and understand  
2 this, I am just showing you a copy of my Exhibit 11.

3 A Sure.

4 Q At page 458 and I am just looking at a large number here,  
5 it looks like it is for \$1,395.36?

6 A That's the original.

7 Q Okay.

8 A That's the lion's share.

9 Q So at least as I look at these and try to figure out when  
10 a policy was written when I see a big number like that  
11 there is a pretty good possibility that's the first  
12 payment you are getting?

13 A That's the first payment, that's correct.

14 Q Okay.

15 A And in that column, that is that same situation there.

16 Here is another number with 722 (indicating).

17 Q Now we are at page 461?

18 A I happened to be here, that is why I pointed.

19 Q Yep.

20 A 80 percent, see they are paying 80 percent.

21 Q And we are on the it looks like Niemi; is that what it is,  
22 or is it Goodwin?

23 A No, I think it's Niemi.

24 Q We are looking at that and we see you are getting for a  
25 commission 80 percent of the \$722.16, right?



1 A Right.

2 Q And that would indicate to you --

3 A Can I just use this? The actual commission amount, let's  
4 see, 577.73 and I believe -- yeah, the actual commission  
5 amount here on that 722 would be 577.73 or 80 percent of  
6 that.

7 Q Yep.

8 A They paid me 80 percent of this figure (indicating), that  
9 is where that 462 is coming in.

10 Q Yep, okay. And then you will get paid the rest some  
11 months later?

12 A Yeah, the 10th, 11th, 12th.

13 Q Do you have at your office any single spreadsheet or the  
14 ability to print one that would show the list of all of  
15 these Fidelity & Guarantee life policies and the date the  
16 policy was issued?

17 A No.

18 Q You just have to go to each file and look at them and see,  
19 is that how you would have to do it?

20 A When it was issued?

21 Q Yeah.

22 A I don't know if there's any dates that we have on that  
23 because --

24 Q Well, when you wrote the policy.

25 A When I actually wrote it?

1 Q Yeah.

2 A That would be on the application.

3 Q And do you have any single piece of paper that would list  
4 all the applications you have written with the date, we  
5 would have to look at each file and pull the date off?

6 A Pull it off the applications for each one.

7 MR. SEEVER: Okay. Well, I will talk to you  
8 about that later, Mr. Andresen, I need to get those dates.

9 BY MR. SEEVER:

10 Q I am showing you now what is marked as Exhibit 12, we  
11 looked at that briefly before, that is the letter from me  
12 to Mr. Andresen?

13 A Right.

14 Q Had you received a copy of this letter prior to preparing  
15 for the deposition?

16 A Yes, right.

17 Q Okay. In these payments that I am asking about here,  
18 those are all life insurance -- or those are all insurance  
19 commission payments, right?

20 A No, they aren't. The Prematic Corporation insurance  
21 premium, that is a payment I make for my auto and  
22 homeowner insurance.

23 Q That's payment out?

24 A That's payment out.

25 Q Okay. And the life insurance premium, is that a payment

1 out also?

2 A Right, that is nursing home insurance.

3 Q Okay. The others are the premium or the commission  
4 payments?

5 A No, the others are commission payments, Continental  
6 General, Fidelity & Guarantee.

7 Q Do you receive commissions from anyone other than F&G Life  
8 and Continental?

9 A Well, on a monthly basis it would be like American  
10 Independent Brokers and United American and there is a few  
11 others, you know.

12 Q Okay.

13 A There is a few others.

14 Q Shen, S-h-e-n?

15 A Shenandoah, that is another one of our life insurance  
16 carriers, but that, we don't use them much.

17 Q Okay. I don't think I got a contract with them from you.

18 A I don't know if we have got one on them either because  
19 they are pretty recent, they are pretty recent, as a  
20 matter of fact, they are just this year. But none of  
21 their figures were in it here, I don't believe, anyway. I  
22 think we have only got one commission check from them, as  
23 a matter of fact.

24 Q Okay.

25 A And that was subsequent, some months before this deadline,

1 I believe.

2 Q Okay.

3 A Or after it, one of the -- but it was nowhere near  
4 April 1, I don't believe.

5 Q Is it accurate to say that the bulk of your commission  
6 money comes from Continental General and F&G?

7 A Oh, yeah.

8 Q Here, I am showing you now what has been marked as Exhibit  
9 Number 13. And Exhibit Number 13 is a copy of the  
10 schedules that were filed in this case?

11 A Yes.

12 Q And turn, if you would, to Schedule B which is personal  
13 property?

14 A Okay.

15 Q I don't see any listing in here for insurance commissions,  
16 I mean, take a look to confirm that.

17 A Insurance commissions?

18 Q Commissions on insurance policy sales?

19 A Well, I don't know quite what you mean, that isn't like  
20 property, physical property.

21 Q Well here, here is my first question, I don't see any  
22 disclosure in here of any right to commission payments, do  
23 you? And if you do, show me where.

24 A Commission payments?

25 MR. ANDRESEN: Do you understand his

1 question?

2 THE WITNESS: Not entirely, no.

3 MR. ANDRESEN: You can ask him if you don't  
4 understand.

5 BY MR. SEAVER:

6 Q I want you to show me in Schedule B where you disclosed to  
7 me your entitlement to renewal commissions or anywhere  
8 else in these bankruptcy schedules that you disclosed  
9 that?

10 A Well, I mean, we gave you all those papers, you know, we  
11 have given you all these --

12 Q Look at the schedules and show me where you disclosed to  
13 me the entitlement to any insurance commissions, that is  
14 what I am asking you right now.

15 A When we did this this was in your office and we gave you a  
16 list of, you know, it says property, physical property,  
17 that is what they asked me for and that is what I gave  
18 them.

19 Q There isn't any mention of insurance commissions in here,  
20 is there?

21 A No.

22 Q Okay. Now turn, if you would here in this same exhibit,  
23 to Schedule I which is current income of individual  
24 debtors.

25 A Schedule I?

1 Q Yes. And how much did you indicate for your current  
2 income?

3 A (No response.)

4 Q Let me help you, it says average estimated gross income.

5 A \$1,000, yeah, that is after expenses.

6 Q You think gross income means after expenses?

7 A Gross income, yes, after I pay the -- that is -- how could  
8 it be income, you know, if I have to send money to make  
9 it, you know, what's left over after I make those  
10 payments.

11 Q So --

12 A If I were working for you, you know, you would pay me a  
13 check but it is after, you know, you get all your sales  
14 and subtract all your expenses out of it.

15 Q So the word gross to you means net?

16 A (No response.)

17 Q How long have you been an insurance agent?

18 A I have been an insurance agent for 29 years.

19 Q What is your educational background?

20 A I have a two-year certificate from a business college and  
21 some college.

22 Q Do you know the difference between the words gross and  
23 net?

24 A Yes.

25 Q Okay. When you put gross estimated -- average estimated

1 gross income, does that mean gross income or net income?

2 A It would mean net.

3 Q So when you put gross here it means net?

4 A We did this in the attorney's office, this is what I  
5 thought they wanted, you know, when she asked me the  
6 questions I answered her, you know, how much is left over  
7 after the expenses and this is what I gave her.

8 Q But then if you go to the next page on your Schedule J you  
9 have got your business expenses in too, don't you?

10 A Total monthly expenses, yes.

11 Q Okay. You are paying for your mother's nursing home  
12 insurance?

13 A That is correct.

14 Q Okay. That's \$241.12 a month?

15 A That is correct.

16 Q To whom do you pay that?

17 A Life Investors.

18 Q I see those checks coming out in your check register.

19 A Yes.

20 Q What is the address of Life Investors?

21 A (No response.)

22 Q You must know, you send the checks there, don't you?

23 A No, it is an automatic payment and it was somebody else  
24 before that, I forgot the name of the insurance company.

25 Q So I would see an electronic withdrawal?

1 A Oh, yes.

2 Q And you have the address somewhere?

3 A No, because they bought whoever had it before them out so  
4 I don't have it, the bank might know.

5 Q Do you deposit your income into any account other than you  
6 have given me the statements for?

7 A No.

8 MR. SEAVER: Well, I want to make sure this  
9 is on the record. Mr. Andresen, these commissions, these  
10 renewal commissions I believe are all property of this  
11 bankruptcy estate, I have several cases here that I will  
12 give you to that affect, one of them being a 2001 case out  
13 of North Dakota it's in re: Swanson decided in December of  
14 2001. I am concerned that those renewal commissions  
15 weren't ever disclosed, I believe that the taking of those  
16 renewal commissions and commissions on first year policies  
17 written pre-petition are all property of the bankruptcy  
18 estate and that Mr. Simon is liable to the estate for  
19 those. And I am going to demand here now on the record  
20 that Mr. Simon not negotiate any checks that are for first  
21 year premiums for policies written before the bankruptcy  
22 filing or nor renewal commissions for policies written  
23 before the bankruptcy filing, that he not negotiate any  
24 more of those checks. I believe they are bankruptcy  
25 estate property.



1                   And I am saying this here because I want  
2           Mr. Simon to understand that too. Do you understand that,  
3           Mr. Simon?

4    A       No, I don't.

5    Q       I am telling you that you cannot negotiate those checks  
6           because I believe they are bankruptcy estate property. We  
7           may have a dispute about that, but that is what I am  
8           telling you right now.

9                   MR. ANDRESEN: Since you are not asking a  
10           question you don't need to respond to it. But Mr. Simon,  
11           I am going to assure him right now that you are not going  
12           to negotiate those checks any further because there is a  
13           question and he may even be right about these commission  
14           renewal checks constituting bankruptcy estate property.  
15           That means until you and I reach an agreement with  
16           Mr. Seaver or until the bankruptcy court issues an order  
17           that says that those renewal commission checks that we are  
18           talking about are not property of the bankruptcy estate it  
19           is simply forbidden for you to negotiate the checks or  
20           spend the money that we are talking about in any way.

21                   THE WITNESS: I am not clear on what that  
22           money is, what money specifically are you talking about?

23                   MR. SEAVAR: We know that all the Continental  
24           payments, almost all of them are renewal commissions on  
25           policies written long before the bankruptcy was filed.

1       You can figure out from your records what commission is  
2       coming from the other.

3               THE WITNESS: Oh, yeah, that I know. But why  
4       didn't you tell me this, why didn't your office tell me  
5       that that was to be included as property?

6               MR. SEAVER: That's a discussion you, for  
7       example, might want to have a different time.

8               MR. ANDRESEN: You are right. For now it is  
9       very clear to me that we need to agree with him that until  
10      the bankruptcy court orders otherwise or until you and I  
11      reach an agreement with him otherwise that money shouldn't  
12      be spent at all because we have to figure out, by getting  
13      an order from the bankruptcy court or reaching an  
14      agreement with Mr. Seaver, that that money is or is not  
15      property of the bankruptcy estate.

16              While the question is raised by the trustee  
17      and he has taken the position that the money belongs to  
18      the bankruptcy estate the money can't be spent at all, we  
19      have to abide by what he is saying. Even though you don't  
20      like thinking about what he is saying, we are talking  
21      about your daily income here, that money can't be spent  
22      until we figure out the question that the trustee is  
23      raising. That is the agreement he wants to come to. I am  
24      sure he is happy hearing me tell you don't spend the  
25      money.

1 MR. SEAYER: If you don't confirm to me right  
2 now on the record that you are going to abide by that --

3 THE WITNESS: I will abide by it, but I am  
4 not sure exactly what it is.

5 MR. SEAYER: He is about to tell you, he will  
6 get a court order right this minute or in a couple of days  
7 that forbids you from spending the money.

8 THE WITNESS: I will agree to it, I am still  
9 uncertain what it is. You mean like in a few days here,  
10 in ten days or so when I get renewal commissions for the  
11 month of September from Continental General, I cannot use  
12 that?

13 MR. SEAYER: That's exactly what I mean. At  
14 the --

15 MR. ANDRESEN: I believe he means starting  
16 right now until -- well, until years and years from now,  
17 whenever these commissions, renewal commissions that come  
18 to you that were written before the bankruptcy case was  
19 filed, he wants you to sit on that money and not spend it  
20 until we figure out this question.

21 MR. SEAYER: Well, more than that, that is  
22 part of it, Mr. Andresen, I think the prudent thing to do  
23 would be perhaps what we did in another case until there's  
24 a resolution, one of two things, pay it into your trust  
25 account or I put it in my trustee account for this case

1 with the understanding that there is no resolution as to  
2 ultimate entitlement, it is just being held while we  
3 figure this out or while the court figures it out.

4 MR. ANDRESEN: Yes, I think the use of your  
5 attorney trust account would be most appropriate for this,  
6 so language as we agree that the depositing of him putting  
7 the money into the attorney trust account wouldn't be in  
8 the bankruptcy estate.

9 MR. SEEVER: We would just do a stipulation  
10 that says you aren't waiving any rights or anything like  
11 that, we are maintaining it status quo.

12 MR. ANDRESEN: So as long as we agree that  
13 his depositing of money into this account wouldn't  
14 constitute him paying it to the estate, but rather than  
15 for safekeeping purpose as a trust account.

16 MR. SEEVER: Absolutely, that is fine, we can  
17 do all the disclaimers that we want, the point would be  
18 you are not waiving any rights or giving up anything or  
19 admitting anything by doing that.

20 MR. ANDRESEN: Right, I think that is most  
21 appropriate to do.

22 MR. SEEVER: Okay.

23 MR. ANDRESEN: He has automatic deposits so  
24 there might be a question of how to accomplish this  
25 logistically.

1 THE WITNESS: They are all automatic.

2 MR. SEAYER: Let's do this. As soon as the  
3 automatic deposit comes in, issue a check in that amount  
4 immediately payable -- should we have it payable to me as  
5 trustee or to you or how do you want to do it, Craig? It  
6 doesn't matter, if it goes through you it is another step  
7 for both of us.

8 MR. ANDRESEN: That is a good question.  
9 Well, let's see.

10 MR. SEAYER: Let's go off the record here for  
11 just a moment.

12 (Discussion held off the record.)

13 MR. SEAYER: We are back on the record now,  
14 while we were off the record we talked about various  
15 things on those commissions. I indicated to Mr. Andresen  
16 and Mr. Simon for policies written after the bankruptcy  
17 was filed the estate doesn't claim any interest in those  
18 policies. And we agreed, I believe, and I want Mr. Simon  
19 and Mr. Andresen to confirm this, that as to renewal  
20 commissions and first year commissions for all policies  
21 written prior to commencement of the bankruptcy case  
22 Mr. Simon, when he receives the direct deposit of premiums  
23 for those he will immediately, by immediately I mean that  
24 day, write a check payable to Randall Seaver, Simon  
25 trustee. I will deposit that check into my trustee

1 account for this case, however, it will be without any  
2 prejudice to Mr. Simon's rights, defenses, arguments as to  
3 my entitlement or his entitlement to that money, it is not  
4 an admission of anything by Mr. Simon, it's merely a  
5 device by which we are going to hold the money pending  
6 resolution of this matter. I indicated to Mr. Andresen I  
7 would give him a letter saying these same things; is that  
8 accurate?

9 MR. ANDRESEN: That's accurate. Thanks for  
10 putting it on the record of we are establishing that him  
11 turning the funds over to you means that he is turning  
12 over the funds to your trust account and not turning it  
13 over to the bankruptcy estate so that he is not conceding  
14 the state becomes owners of the funds.

15 MR. SEAYER: It will be go into my bankruptcy  
16 trustee account for this case, but he is not conceding to  
17 anything, it is kind of a convenience matter.

18 THE WITNESS: How am I going to survive? Can  
19 I get money out of my retirement account?

20 MR. ANDRESEN: I am sure he is sympathetic to  
21 you, he will probably tell you to talk to me about it.

22 MR. SEAYER: That's what I would tell you.

23 THE WITNESS: Oh.

24 MR. SEAYER: The payment of this money is not  
25 a concession of any sort, my position is clear and we will

1           see how things develop. I don't have anything further.

2                       MR. ANDRESEN: Okay. He will come and  
3           inspect it.

4                       (Deposition concluded at 2:45 p.m.)

VERIFICATION OF DEPONENT TO TRANSCRIPT

I, DANIEL SIMON, do hereby verify that I have read the foregoing transcript consisting of the preceding 59 pages and do further verify that it is a true and complete transcript of the testimony given by me (except for the following, stating page and line number and the reason for the change).

Page	Line	Change or Addition	Reason
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
15.			
16.			
17.			
18.			
19.			
20.			
21.			
22.			
23.			
24.			
25.			

\_\_\_\_\_  
DANIEL SIMON

DATED: \_\_\_\_\_

\_\_\_\_\_  
Notary

Signed before me this \_\_\_\_\_ day of \_\_\_\_\_, 2004.

KIMBERLY K. EVAVOLD, RPR



1 STATE OF MINNESOTA)  
2 ) SS.  
3 COUNTY OF HENNEPIN)

4 Be it known that I took the deposition of  
5 DANIEL SIMON, on the 22nd day of September, 2004, at Suite 132,  
6 12400 Portland Avenue South, Burnsville, Minnesota;

7 That I was then and there a Notary Public in  
8 and for the County of Hennepin, State of Minnesota, and that I  
9 was duly authorized to administer an oath;

10 That the witness, before testifying, was  
11 first duly sworn to testify the truth and nothing but the truth;

12 That the testimony was recorded by myself and  
13 transcribed into a computer-aided transcript and that the  
14 deposition is a true record of the testimony given by the  
15 witness to the best of my ability;

16 That the cost of the original transcript has  
17 been charged to the party noticing the deposition, unless  
18 otherwise agreed upon by Counsel; and that copies have been made  
19 available to all parties at the same cost, unless otherwise  
20 agreed upon by Counsel;

21 That I am not related to any of the parties  
22 hereto nor interested in the outcome of the action;

23 That the reading and signing of the  
24 deposition by the witness was not waived, and that the original  
25 transcript will be retained by Mr. Seaver;

WITNESS MY HAND AND SEAL THIS 7th day of  
October 2004.

\_\_\_\_\_  
KIMBERLY K. EVAVOLD  
Registered Professional Reporter

# Filing Instructions

## Form M1PR - Property Tax Refund

Taxable Year Ended December 31, 2003

Name: DANIEL J. SIMON

Date Due: August 16, 2004

Remittance: None is required. There is a total credit of \$690, which is to be refunded in its entirety.

Other: Your return has been filed electronically. Do not mail Form M1PR. Initial and date the copy of the return and retain it for your records.

DANIEL

J SIMON

16467947

Mark an X in the boxes that apply:

7527 HAROLD AVENUE

11151944

MINNEAPOLIS

MN 55427

Mark an X in the boxes that apply:

Renter

X

Homeowner

Nursing home or adult foster care resident

Mobile home owner

State Elections Campaign Fund. If you did not designate on your 2003 state income tax return, and you want \$5 to go to help candidates for state offices pay campaign expenses, you may each enter the code number for the party of your choice. This will not reduce your refund.

Political party and code number:  
Independence ..... 11 Green ..... 14  
Republican ..... 12 General Campaign Fund ..... 16  
Democratic Farmer-Labor 13

Code number for you: Code number for spouse:

- 1 Federal adjusted gross income (from line 34 of federal Form 1040, line 21 of Form 1040A, line 4 of Form 1040EZ, or line 1 of telefile tax record) ..... 1 ☒ 8648
- 2 Non-taxable Social Security and/or Railroad Retirement Board benefits received and not included in line 1 above (determine from instructions on page 8) ..... 2 ☒
- 3 Deduction for payments made to an IRA, Keogh, Simplified Employee Pension (SEP) or SIMPLE plan (add lines 24 and 30 of federal Form 1040 or from line 17 of Form 1040A) ..... 3 ☒
- 4 Total welfare received, including MFP (Minnesota Family Investment Program), MSA (Minnesota Supplemental Aid), SSI (Supplemental Security Income), GA (General Assistance) and GRH (Group Residential Housing) ..... 4 ☒
- 5 Additional non-taxable income such as workers' compensation or contributions to a 401(k) plan; you must include (see instructions, page 8). Enter the type(s) of income below: ..... 5 ☒
- 6 Add lines 1 through 5. If the result is less than the rent you paid, enclose an explanation ..... 6 ☒ 8648
- 7 Determine subtraction amount from page 9 of the instructions:  
From the worksheet in the instructions, enter number ..... 7 ☒  
Mark an X if you or your spouse are: 65 or older disabled  
Write the name and Social Security number of each dependent below: ..... 7 ☒
- 8 Total household income. Subtract line 7 from line 6 (if result is zero or less, leave blank). See instructions, page 9, for income limits ..... 8 ☒ 8648
- 9 Renters: Line 3 of your 2003 Certificate(s) of Rent Paid (CRP) ..... 9 ☒ 0  
Continue with line 10; this amount is not your refund (enclose your CRPs)
- 10 Renters: Using the amounts on line 8 and line 9, find the amount to enter here from the renters refund table on pages 12-16 of the instructions ..... 10 ☒ 0
- 11 Homeowners: Line 1 of Statement of Property Taxes Payable in 2004 (enclose a copy) ..... 11 ☒ 993
- 12 Homeowners: Special property tax refund from line 31 of Schedule 1 (see instructions) ..... 12 ☒ 0
- 13 Homeowners: Subtract line 12 from line 11 (if result is zero or less, leave blank) ..... 13 ☒ 993
- 14 Homeowners: Using the amounts on line 8 and line 13, find the amount to enter here from the homeowners refund table on pages 17-22 of the instructions ..... 14 ☒ 690
- 15 Total. Add lines 10, 12 and 14 ..... 15 ☒ 690
- 16 Non-game Wildlife Fund contribution. Your refund will be reduced by this amount ..... 16 ☒ 0
- 17 PROPERTY TAX REFUND. Subtract line 16 from line 15 ..... 17 ☒ 690
- 18 For direct deposit of the full refund on line 17, enter: ..... 18 ☒ 690  
Your signature is required on back.

Simon EXHIBIT 1  
DATE 9.22.04  
KIMBERLY K. EVAVOLD  
COURT REPORTER

ally, you must have owned and lived in this homestead  
January 2, 2004. If you qualify, see the instructions on page 11.  
Property Taxes Payable in 2004. If the Statement does not list

0322

M1PR

Homesteads with New Improvements and  
Business Use Percentage Worksheets

2003

18. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.  
19. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.  
20. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.  
21. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.  
22. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.  
23. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.

24. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.  
25. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.  
26. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.

27. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.

28. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.  
29. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.

30. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.  
31. If you have a homestead exemption, skip lines 20 and 21 and enter this amount on line 22.

Schedule 2 - Mobile home owners

32. Line 3 of the 2003 CRP you received for rent paid on your mobile home lot

33. Line 1 of your Statement of Property Taxes Payable in 2004

34. Add line 32 and line 33. Enter the result here and on line 11 of this Form M1PR

Schedule 3 - Residents of nursing homes, adult foster care homes or health-care facilities

35. Amount from line 8 of this Form M1PR

36. Amount you received from Supplemental Security Income (SSI), Minnesota Supplemental  
Aid (MSA) or Group Residential Housing (GRH) that was included in line 35

37. Subtract line 36 from line 35

38. Total Medicaid and GAMC payments made directly to your landlord from your 2003 CRP

39. Add line 35 and line 38

40. Divide line 37 by line 39 and enter the resulting decimal

41. Using the amounts on line 8 and line 9 of this Form M1PR, find the amount to  
enter here from the renters refund table on pages 12-16 of the instructions

42. Multiply line 41 by line 40. Enter the result here and on line 10 of this Form M1PR

I declare that this return is correct and complete to the best of my knowledge and belief. Paid preparer: You must sign below.

Your signature Date

Preparer's signature (if filing jointly) Daytime phone

5/17/04

952 9311174

P00027326

Include your 2003 CRP (renters) or the state copy of your  
Statement of Property Taxes Payable in 2004 (homeowners)  
Mail to: Minnesota Property Tax Refund, St. Paul, MN 55145-0020

I authorize the Minnesota Department of  
Revenue to discuss this return with my preparer.

1015

Stock No. 1003800

Name

DANIEL J. SIMON

Taxpayer Identification Number

476-46-7947

Homesteads with New Improvements Worksheet

1. Amount of new improvements in the 2004 column listed on your  
Statement of Property Taxes Payable in 2004
2. Amount of Taxable Market Value in the 2004 column
3. Divide line 1 by line 2 and convert to a percentage

Business Use Percentage Worksheet

1. Amount from line 1 of your Statement of Property Taxes Payable in 2004 or line 3 of your CRP
2. Percent of your home not rented to others or not used for business
3. Multiply line 1 by line 2, enter result on line 9 (renter) or line 11 (homeowner)

Your Appointment for the state of Minnesota has now been approved.

Agent number 98219 Lines qualified for life & health Effective date 5 / 7 / 96

☒ We are enclosing the following items signed contract & MN Appointment

Please let us know if we can help you further.



Agency Department  
AC - (Rev. 2/95)  
cc: LeClair

Continental General Insurance Company

Simon EXHIBIT 2  
DATE 9-22-04  
KIMBERLY K. EVAVOLD  
COURT REPORTER

000001

# CONTINENTAL GENERAL INSURANCE COMPANY

8901 Indian Hills Drive

P.O. Box 247007

Omaha, Nebraska 68124-7007

## GENERAL AGENT AGREEMENT

### 1. APPOINTMENT

The Continental General Insurance Company (the "Company") appoints the General Agent, hereinafter specified as its "Agent", to represent the Company in accordance with this Agreement.

### 2. RELATIONSHIP

Agent's relationship to the Company shall be that of an independent contractor and nothing contained in this Agreement shall make Agent, his sub-agents or any of his employees, employees of the Company. Agent and his sub-agents shall be free to use their own judgment in complying with this Agreement subject to the limitations hereinafter stated and subsequently adopted.

### 3. AUTHORITY AND RESPONSIBILITY

The Company authorizes and charges the Agent with the responsibilities:

- (a) to solicit personally, and through properly licensed sub-agents, applications for insurance policies described in the Schedules of Commissions, and to promptly forward the applications to the Company for its consideration,
- (b) to collect the full initial premium for policies and certificates to be issued and to promptly submit all premiums collected and applications to the Company,
- (c) to make reasonable efforts to maintain the Company's insurance in force and to provide reasonable assistance to Company policyholders,
- (d) to contact prospective sub-agents to solicit insurance for the Company and to recommend them to the Company. The Company reserves the right to refuse to contract with any agent. All agreements with sub-agents recruited by Agent shall be made directly with the Company in writing on Company forms. No agreement shall be effective until accepted by Company. Agent does not have the authority to change or terminate any agreement between the sub-agent and the Company. The Company may terminate any agreement made with any agent with or without cause at the sole discretion of the Company,
- (e) to be governed strictly by all underwriting rules, regulations and instructions contained in the Company's rate books, manuals, or otherwise, and to observe and comply with all applicable insurance laws and regulations. In the event of any dispute between the parties hereto as to the interpretation of the Company's underwriting rules, regulations and instructions, the Company in its sole discretion shall resolve any such dispute,
- (f) to keep such records in such form as may be reasonably required by the Company and/or as required under applicable laws and regulations. Such records and forms together with all rate books and all supplies furnished to the Agent by the Company shall remain the property of the Company and shall be subject to examination and/or possession at any time by the Company or its authorized representatives,
- (g) to pay all expenses incurred in the performance of this contract and to furnish upon request a fidelity or surety bond in an amount and in such form as may be requested by the Company,
- (h) to deliver policies immediately. It is understood that any policies not delivered within 30 days from the date mailed from the Home Office of the Company shall immediately be returned to the Company for cancellation or reconsideration,

000002

- (i) to indemnify and promptly reimburse the Company (hereinafter called "Creditor") the amount of the Agent's debit balance, and/or the debit balance of any of the Agent's sub-agents, if any, as shown on the books of the Company and no matter how such debit balance was created. Agent shall be responsible to Company for the fidelity and honesty of all sub-agents recruited by Agent. Additionally, Agent shall be responsible to Company for all monies collected by Agent or his sub-agents as premiums on Company policies. It is understood that the Agent's responsibility for his indebtedness and/or the indebtedness of his sub-agents, shall survive any termination of this Agreement. The Agent does hereby waive any notice, demand or any right to require the Creditor to pursue any other remedy or action which may be available to the Creditor to collect such debit balance; nor shall the Creditor be obliged to forego collection of such debit balance until termination of this Agreement but may proceed with collection at any time and
- (j) to, if requested to do so by the Company, pay a fee as established by the Company for each policy issued as applied for and subsequently returned for cancellation or if the application was taken in violation of the Company underwriting rules.

#### 4. LIMITATIONS OF AUTHORITY

Agent's authority does not permit him to:

- (a) make, alter or discharge any contract to which the Company is a party,
- (b) waive or modify any terms, rates, conditions or limitations of any policy or certificate,
- (c) approve evidence of insurability or improperly bind or commit the Company on any risk or in any manner,
- (d) deliver any policy where the health of the applicant at the time of the delivery is other than as stated in the application for insurance,
- (e) collect or receive any premiums after the initial premium,
- (f) extend the time for any premium payment or reinstate any lapsed policy,
- (g) adjust or settle any claim unless specifically directed by the Company or to admit liability on any claim unless authorized to do so in writing by the Company,
- (h) solicit applications in any state without a valid state insurance license or solicit applications for or through a corporation or partnership that is not properly licensed in any state where such license is required of a corporation or a partnership,
- (i) enter into any legal proceedings pertaining to the Company's business without the prior written consent of the Company. The Company shall not be responsible for any expenses incurred as a result of these proceedings,
- (j) exercise any authority on behalf of the Company other than as authorized by Paragraph 3,
- (k) publish or circulate any advertisements, sales literature, policy analyses, proposals or other printed material referring to the Company or its products without prior written consent of the Company,
- (l) bind the Company by any promise or agreement or incur any debt, expense, or liability in its name or account,
- (m) pay or allow or offer to pay or allow as an inducement to any person to insure, any rebate of premium or consideration or any inducement not specified in the policy,
- (n) sign an application for a policy, as the writing agent, unless such application was personally taken by Agent in the presence of the applicant.

#### 5. TAXES AND LICENSES

It is understood that all Agent License Fees or any other license fee or any municipal, county or occupational taxes whether billed to the Company or the Agent shall be the responsibility of the Agent, except in those states where state law specifies that the Company must pay initial Agent License Fee.

000003

## 6. TERRITORY

Agent is authorized to solicit applications for those types of insurance contracts which may be issued and are authorized by the Company and which are referred to in the attached Schedules of Commissions and in such territory as may be assigned to the Agent by the Company. No territory is assigned exclusively to Agent.

## 7. COMPANY RIGHTS

The Company specifically reserves the right to:

- (a) discontinue or withdraw any contract, policy or certificate from any state or territory,
- (b) modify or amend any contract, policy or certificate or premium rates,
- (c) determine maximum and minimum limits on the contract, policy or certificate,
- (d) modify or change the conditions or terms under which any contract, policy or certificate may be offered,
- (e) modify, amend, delete or add any Company procedure by written notice of the change,
- (f) cease doing business in any state.

## 8. VESTING — COMPENSATION AFTER TERMINATION

Upon termination of this General Agent's Agreement with the Company by either party the Company will pay either to the Agent or in event of death or total disability of Agent to Agent's surviving spouse, next of kin or legal representative, as the Company may elect or, if this Agreement is with a corporation or partnership to the corporation or partnership compensation as follows:

- (a) The remainder of the first policy year commission.
- (b) Renewal commission on policies personally produced by Agent will vest and be payable according to the following schedule:

AGENT PERSONAL VESTING SCHEDULE — LIFE AND HEALTH	
Annualized Agent's Premium In Force	Number of Years Renewals Vested
0 to \$9,999	0
Over \$10,000	Renewals fully vested

- (c) Renewal overwrite commission will vest and be payable according to the following schedule:

SUB-AGENT OVERWRITE VESTING SCHEDULE — LIFE AND HEALTH	
Annualized Overwrite Premium In Force	Number of Years Renewals Vested
0 to \$50,000	0
Over \$50,000	Renewals fully vested

- (d) Any service fees or other commission fees which may be payable after the tenth policy year are not vested.
- (e) Upon termination of this Agreement overwrite commissions shall be vested on business in force on date of termination. In the event sub-agents of Agent continue to write business after date of termination, Agent shall not be paid overwrite commission on that new business.
- (f) When the total of the renewal commission and renewal overwrite commission payable to the Agent is less than \$600 in any calendar year, then such renewal compensation payments shall cease.

## 9. COMPENSATION

It is understood and agreed:

000004

- (a) As full compensation for the services of the Agent and if applicable, services of any sub-agents appointed by the Agent, the Company will allow the Agent commission according to the attached Schedules of Commissions. However, on business written by sub-agents of the Agent, the overwrite commission payable to Agent will be the difference, if any, between commissions payable to Agent and any commission payable to sub-agent. In the event of termination of sub-agent's Agreement, while this Agreement is in force, commissions formerly payable to sub-agent will revert to Agent once sub-agent's Vesting rights are fully satisfied under his sub-agent's Agreement with the Company. Payment of all commissions shall be made directly by Company.
- (b) That the Company may, upon prior notice to the Agent, change or terminate the compensation allowance on any plans covered thereby, or add additional new policy forms and establish the rates of compensation thereon, or withdraw policy forms but no change or withdrawal shall apply to any policy written prior to the effective date of such notice. Acceptance of commissions payable on new or changed policies will be deemed to have occurred as of the date of receipt by the Company of Agent's first application for the plan(s) being changed or new plans.
- (c) That if the Company, for any reason, refunds any premium or part of premium on any policy, any commissions paid the Agent on the amount refunded shall be immediately repaid to the Company or, at the option of the Company, be deducted from any compensation payable to the Agent.
- (d) That the amount, if any, and the time of payment of commissions and fees on replacements, changes, exchanges, term renewals, premiums paid in advance, premium rate increases and other special cases shall be governed by the rules and regulations of the Company.
- (e) That the payment of compensation shall always be subject to the Agent and/or his sub-agents being properly licensed in the designated territory.

## 10. INDEBTEDNESS

Any indebtedness due from Agent or his sub-agents will be a first lien on any monies due or to become due under this Agreement and the Company may, at any time, deduct from any monies due Agent, any such indebtedness together with interest at the legal rate and any collection costs incurred by the Company. The Company has the right to charge and collect interest up to the highest lawful rate on debit balances created by the Agent or his sub-agents, no matter how such balances were created.

## 11. ASSIGNMENT

No assignment of this Agreement or of any compensation due or to become due shall be valid unless approved in advance in writing by an officer of the Company. Any assignment shall be subject to any existing or future indebtedness to the Company by Agent and his sub-agents.

## 12. REMITTANCES

Agent is responsible for any monies received or collected on behalf of the Company, whether by Agent or his sub-agents or his employees. All monies shall be held by Agent in a fiduciary capacity until remitted in full to the Company and shall not be misappropriated, commingled, or withheld from the Company.

## 13. INDEMNITY

Agent will indemnify and hold the Company harmless from all expenses, costs, damages or causes of action incurred by the Company resulting from his unauthorized acts or those of his sub-agents and employees.

Agent is also responsible for all expenses incurred in connection with the conduct of his business for the Company.

## 14. MATERIALS AND RECORDS

All Company materials provided to Agent such as programs, manuals, tapes, guidelines or any other information pertaining to the Company's products, or their content, whether developed by the Company or developed by Agent, shall remain the sole and exclusive property of the Company, and shall be used only in the solicitation of applications for Company policies and certificates and may not be used for any other purpose without prior written approval of the Company.

000005



Agent's accounts, ledgers, correspondence and other records pertaining to this Agreement shall be open for inspection by an authorized Company representative.

## 15. TERMINATION

Either Agent or the Company may terminate this Agreement with or without cause by written notice mailed or delivered to the last known address of the other party.

This Agreement will terminate by Agent's death or, if in the opinion of the Company Agent becomes totally disabled, unless this Agreement is with a corporation or partnership.

This Agreement will terminate, without notice, immediately and automatically in the event of Agent's violation of or non-compliance with the terms of this Agreement.

This Agreement will terminate, without notice, immediately and automatically upon cancellation or non-renewal of Agent's license to represent the Company unless this Agreement is with a corporation or partnership.

If this Agreement is with a corporation or partnership, its dissolution, bankruptcy or insolvency or assignment for the benefit of creditors shall immediately and automatically, without notice, terminate the Agreement.

A revocation or suspension of Agent's license by any insurance department shall, without notice, effect an immediate and automatic termination of this Agreement and forfeiture of all rights, including any termination rights unless the Agreement is with a corporation or partnership.

If this Agreement is with a corporation or partnership and state laws, where Agent resides, require the licensing of a corporation or partnership in order to sell insurance, then in that event a revocation or suspension of said license by the governing body shall, without notice, effect an immediate and automatic termination of this Agreement and forfeiture of all rights, including any termination rights.

## 16. GENERAL PROVISIONS

It is understood and agreed that:

- (a) The invalidity or unenforceability of any of the terms or conditions herein shall not render invalid or unenforceable any of the other terms or conditions of this Agreement.
- (b) Any good will and business built in connection with this Agreement shall be the property of the Company. The Agent agrees that he will not have any claim against the Company with respect to any investment of the Agent in anticipation of any income under this Agreement or any attachments thereto.
- (c) The Agent agrees that he will not (1) endeavor to induce any agent of the Company to discontinue his agent's contract or any policyowner to replace a policy of the Company with a policy of another company; (2) fail to pay over money or withhold records or property belonging to the Company; (3) willfully fail to comply with any insurance laws or rules or regulations of the Company; or (4) conduct himself in such a way as to prejudice the interests of the Company. If any of these events shall occur, the obligation of the Company to pay compensation under any and all agency Agreements with the Company shall, without notice, immediately and automatically cease.

## 17. PRIOR AGREEMENT

It is agreed that if any prior agreement(s) between the parties is terminated by virtue of acceptance of this Agreement, commissions earned and payable under the prior agreement(s) in accordance with its terms shall not be reduced by reason of termination of the prior agreement(s) so long as this Agreement remains in full force and effect, but vesting shall be in accordance with the Personal Vesting and Overwrite Vesting Schedules of this Agreement. Effective upon termination of this Agreement, any provision of the prior agreement(s) relating to payment reduction or discontinuance of renewal commissions earned under the prior agreement(s) shall become operative in accordance with the terms and provisions of such prior agreement(s) except that for vesting purposes only, the Personal Vesting and Overwrite Vesting Schedule of this Agreement shall likewise apply.

**8. CONSUMER REPORT**

In signing this Agreement it is hereby understood that an investigative consumer report may be prepared whereby information is obtained through personal interviews with Agent's neighbors, friends or others with whom Agent is acquainted. This inquiry includes information as to your character, general reputation, personal characteristics and mode of living. Agent has a right to make written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

**19. NON-WAIVER**

Forbearance or neglect of the Company to insist upon the performance of any provisions of this Agreement at any time or under any circumstances shall not constitute a waiver.

**20.** This agreement shall be governed by and construed in accordance with the laws of the State of Nebraska.

**21. ENTIRE AGREEMENT**

This Agreement, including the attached Schedules of Commissions and any supplements shall become effective on the effective date specified and shall terminate and supersede any prior agreements between Agent and the Company. No oral promises or representations shall be binding nor shall this Agreement be modified except by agreement in writing executed on behalf of the Company by a duly authorized officer of the Company.

This Agreement is to become effective as of May 7, 19 96.  
(Company will Assign Date)

CONTINENTAL GENERAL INSURANCE COMPANY

By [Signature]

Officer's Title Asst. Regional Vice President

Individual General Agent Complete Box ☐

Corporation Or Partnership Complete Box ☒

**1 IF GENERAL AGENT IS AN INDIVIDUAL, COMPLETE THE FOLLOWING**

[Signature]  
(General Agent Signature)

DANIEL JOHN SIMON  
Name (Print or Type)

98219  
(Agent Number)  
(Company Use)

476-48-7947  
Social Security No. or Tax I.D. No.

**2 IF GENERAL AGENT IS CORPORATION OR PARTNERSHIP, COMPLETE THE FOLLOWING**

Agent or Corporate Name \_\_\_\_\_

(Agent Number)  
(Company Use)

By \_\_\_\_\_  
(Authorized Signature)

Title \_\_\_\_\_

Social Security No. or Tax I.D. No. \_\_\_\_\_

**GUARANTEE BY CORPORATION OFFICERS OR PARTNERS**

In consideration of the Company executing this contract, each of the undersigned does personally guarantee the performance of all terms, conditions and covenants of this contract and assumes personal liability and responsibility for any default in said terms, conditions, and covenants.

Signature

Title

Date

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

STATE OF MINNESOTA  
DEPARTMENT OF COMMERCE  
133 EAST SEVENTH STREET  
ST. PAUL, MINNESOTA 55101  
(612) 296-6319

INSURANCE AGENT  
COMPANY APPOINTMENT

The information which you furnish on this form will be used by the Department of Commerce to process the agent appointment. You are not legally required to provide this information, however, if you fail to do so, the Department of Commerce will be unable to process the appointment. Disclosure of a social security number is authorized by Minnesota Statute, Chapter 270A. This form is considered a part of the agent application. After issuance of a license, information contained in this application, other than the social security number, is public pursuant to Minnesota Statute, Chapter 13.

A. AGENT INFORMATION		
Agent's Last name <b>SIMON</b>	First Name <b>DANIEL</b>	Middle Initial/Name <b>Jr.</b>
Street Address <b>7527 HAROLD AVE</b>		
City <b>MPLS</b>	State <b>MN</b>	Zip Code <b>55427</b>
License Number (unless new agent) <b>582612</b>	Social Security Number <b>476-46-7947</b>	

B. RESIDENT STATUS		C. INDICATE INSURANCE CLASSES REQUIRED (check all that apply)	
<input checked="" type="checkbox"/> Resident	<input type="checkbox"/> Nonresident	<input checked="" type="checkbox"/> LIFE/ACCIDENT/HEALTH	<input type="checkbox"/> TRAVEL/BAGGAGE
		<input type="checkbox"/> PROPERTY/CASUALTY	<input type="checkbox"/> FARM P & L
		<input type="checkbox"/> VARIABLE ANNUITY	<input type="checkbox"/> BAIL BONDS
		<input type="checkbox"/> TITLE	

D. COMPANY CERTIFICATION	
I, the undersigned, do hereby appoint the above agent to conduct business on behalf of our company as of the date signed below.	
Company Name <b>CONTINENTAL GENERAL INSURANCE COMPANY</b>	
Company's State of Domicile <b>NEBRASKA</b>	Company's NAIC Number <b>71404</b>
Mailing Address (for forms that must be returned) <b>PO BOX 247007</b>	
City <b>OMAHA</b>	State <b>NEBRASKA</b>
Zip Code <b>68124-7007</b>	
Telephone Number (include area code) <b>(402) 397-3200</b>	
Typed or Printed Name of Authorized Representative <b>Candy Moody</b>	
Signature of Authorized Representative <i>Candy Moody</i>	
Date <b>5-7-96</b>	

E. INSTRUCTIONS	
The applicant will be appointed to your company effective the date of the authorized representative's signature on this form provided that:	
1. The form is properly completed in its entirety.	
2. <b>FOR NEW AGENTS:</b> If the applicant is working on passing test results, a company appointment is needed. However, do not submit the appointment until the license application is submitted.	
3. <b>FOR CURRENTLY LICENSED AGENTS:</b> The form and fees are to be received by mail or personal delivery to the Department of Commerce within 30 days of the date of the authorized representative's signature.	
4. The check or money order must be made payable to "MINNESOTA COMMERCE DEPARTMENT". WE CANNOT ACCEPT CASH.	
5. A copy of the completed form should be forwarded to the agent.	
6. An applicant may be appointed for more than one line on this appointment form by one company if that company is authorized for those lines in Minnesota. Also, the applicant may represent other companies for one or more of the lines of insurance for which the applicant is qualified, but first must be appointed by each company.	
7. Company appointments are continuous and do not require re-appointment each year. The appointments are terminated if (a) the company cancels the appointment(s) in writing; (b) the agent cancels the appointment(s) in writing; or (c) the license of the agent lapses.	

# SCHEDULE OF COMMISSIONS

## CONTINENTAL GENERAL INSURANCE COMPANY

OMAHA, NEBRASKA  
FOR

Daniel J Simon

May 7, 1996

NAME OF AGENT

EFFECTIVE DATE OF THIS SCHEDULE

This Schedule becomes a part of the Agreement between the Agent and Continental General Insurance Company. The terms and conditions of the Agreement and any supplement thereto will also be terms and conditions of this Schedule.

### ACCIDENT AND HEALTH

POLICY TYPE	PERCENT OF PREMIUM		
	1st Yr.	2nd-10th Yr.	11th Yr. & After
<b>MAJOR MEDICAL (CALENDAR YEAR DED.)</b> Form 12A or state variation Forms 01A — 01C 02A & 02B (Washington Only) 03A (Montana Only) Thru Attained Age 59 Attained Age 60-65	25    25 15	5   5 5	0   0 0
<b>PREFERRED PROVIDER OPTION</b> Thru Attained Age 59 Attained Age 60-65	25 15	5 5	0 0
<b>HOSPITAL/SURGICAL EXPENSE BENEFITS</b> Forms HS1 Thru Attained Age 59 Attained Age 60-65	25 15	5 5	0 0
<b>HOSPITAL INDEMNITY</b> Forms 705/730 Forms 706/709	50 28	8 8	8 8
<b>DISABILITY</b> Form 208	55	8	0
<b>ACCIDENT ONLY</b> Form 810/816	57	14	0
Form TIM	15	0	0
Form STM/S10	21	0	0
<b>MEDICARE SUPPLEMENT</b> Forms 351/352 (Minnesota) Form 350 (Wisconsin) Commission not paid on rate increases Part B Deductible Rider is non-commissionable	1st - 6th Year		7th Yr. & After
	23 23		7 7
<b>LONG TERM CARE</b> Forms 405/406/407/408/409/410/411 420/423/428/429 Age 79 & Under Age 80 & Over	1st Yr.	2nd-3rd Yr.	4th Yr. & After
	50 40	11 9	10 5
<b>CANCER PLAN</b> Forms 907 & 908 (Minnesota) Forms 907 & 908 (Wisconsin)	50 60	10 13	7 9

- If a policy is changed to a different plan, 1st Year commissions will be paid only on the amount of the increased premium.
- Note: Submission of applications for policies covered by this Schedule will constitute acceptance by the Agent of the compensation specified herein.

CONTINENTAL GENERAL INSURANCE COMPANY

000009

# **ACCIDENT AND HEALTH (CONT')**

POLICY TYPE	PERCENT OF PREMIUM		
	1st Yr.	2nd Yr. & After	
<b>GROUP</b>			
FIRST COVERAGE Form 750MS	40	7	
MEDIGAP Forms 360-365	1st-6th Yr.	7th Yr. & After	
	9	3	
CANCER Form 915	1st Yr.	2nd-3rd Yr.	4th Yr. & After
	50	10	6
DENTAL			
INDIVIDUAL FORMS ADN 1 - BDN 1 - CDN 1	10	10	10
GROUP FORMS ADG 1 - BDG 1 - CDG 1 - DGD 1	8	8	8

## **LIFE INSURANCE AND ANNUITIES**

LIFE INSURANCE AND ANNUITIES				
Universal Life	% of Target Premium	1st Yr.	% of Excess Over Target	Thereafter % of Deposits
ACHIEVALIFE/PREMIER CHOICE				
GENERAL/5 STAR GENERAL	80		3.8	3.8
UNI-FLEX/GENERAL CARE/FIRST TO DIE				
INCREASE IN SPECIFIED AMOUNT* 80% of Target Premium for the Amount of increase.				
*Specified Amount increases as a result of a COLA Rider, or a Future Purchase Option Rider, are commissionable at 45% of the Mortality Charge for the increase as opposed to Target Premium.				
	First Year Placement Fee	% of Premium First Year	% of Mortality Charge First Year	% of Premium Second Year & Thereafter
UNIVERSAL LIFE II	\$108.00	3.6	45	3.6
	1st Year	2nd Year	3-10 Years	
Whole Life				
SENSIBLE LIFE	95	7	7	
BASIC LIFE	95	7	7	
Level Term				
ART-100	50	5	5	
5 YEAR LEVEL TERM—POLICY FEE IS NON-COMMISSIONABLE	50	5	5	
AMERICAN CHOICE TERM—NO POLICY FEE	50	5	5	
CONTINENTAL TERM TO 25	80	3	3	
Group Life	12	12	12	
Annuities	1st thru 5th Year	6th Thereafter	% of Single Premium	
GENERAL FLEX ANNUITY			SINGLE PREMIUM DEFERRED ANNUITY	
Issue Age 0 - 75	6	3	Issue Age 0 - 75	
76 - 80*	4.5	3	76 - 80*	
81 - 85*	3.75	3	81 - 85*	
* A pro-rata commission chargeback will be made if death occurs in the first policy year.				
POLICY RIDERS		EXTRA PREMIUM RATINGS		
All riders paid at same commission as base policy to which it is attached.		(Subject to Home Office rules)		
		TEMPORARY RATING-No commission.		
		PERMANENT RATING-Same commission as base policy.		
		Maximum of Table 6.		

Note: Submission of applications for policies covered by this Schedule will constitute acceptance by the Agent of the compensation specified herein.

000010

# SCHEDULE OF COMMISSIONS

## CONTINENTAL GENERAL INSURANCE COMPANY OMAHA, NEBRASKA FOR

NAME OF AGENT\*\*

EFFECTIVE DATE OF THIS SCHEDULE

This Schedule becomes a part of the Agreement between the Agent and Continental General Insurance Company. The terms and conditions of the Agreement and any supplement thereto will also be terms and conditions of this Schedule.

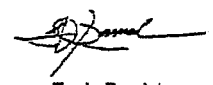
To receive commissions, the overwrite must have a nonresident license for any State that his/her subagent writes business.

### SCHEDULE OF COMMISSIONS—ACCIDENT AND HEALTH

Commissions are paid on initial base premiums.

POLICY TYPE		PERCENT OF PREMIUM		
<b>COMPREHENSIVE LONG-TERM CARE, HOME HEALTH CARE, BASIC LONG-TERM CARE</b> • Commissions on Return of Premium Rider are not paid after the first year. • Includes new sales (not replacements) in Kentucky; for replacement sales, see Indiana.  <b>Forms 460/461/470/471 or state variations</b> Age 54 & Under Age 55 - 59 Age 60 - 64 Age 65 - 69 Age 70 - 74 Age 75 - 79 Age 80 - 84 Age 85 & Over		1st Year	2nd - 10th Year	11th Yr & After
		90	12.5	3
		80	12.5	3
		75	12.5	3
		70	12.5	3
		65	12.5	3
		60	12.5	3
		45	12.5	3
		40	12.5	3
<b>Five Pay and Ten Pay (All States)</b> Age 54 & Under Age 55 - 59 Age 60 - 64 Age 65 - 69 Age 70 - 74 Age 75 - 79 Age 80 - 84 Age 85 & Over		5 Pay 1st - 5th Year	10 Pay 1st - 10th Year	
		28	20	
		26	19	
		26	19	
		24	18	
		22	17	
		20	16	
		18	15	
		18	15	
<b>Forms 460/461/470/471 (Delaware)</b>		1st Year	2nd Yr & After	
		22	22	
<b>Forms 460/461/470/471 (Indiana)</b> (Replacement sales in Kentucky)		1st Year	2nd Yr & After	
Age 79 & Under Policies issued WITHOUT Return of Premium Rider Policies issued WITH Return of Premium Rider		40 32	20 16	
Age 80 & Over Policies issued WITHOUT Return of Premium Rider Policies issued WITH Return of Premium Rider		31 27	15.5 13.5	

- Commissions are not paid on any annual trends, quarterly trends, attained age increases, or on additional tobacco premium.
- If a policy is changed to a different plan, 1st Year commissions will be paid only on the amount of the increased premium.
- Note: Submission of applications for policies covered by this Schedule will constitute acceptance by the Agent of the compensation specified herein.
- For persons that become Medicare eligible and continue their current policy, NO COMMISSION will be paid.
- Policy Fees and/or Association Fees are noncommissionable.
- Commissions are based on the age of the oldest insured.
- In Pennsylvania, General Agent

  
T. J. Parrish  
Sr. Vice President

# SCHEDULE OF COMMISSIONS—ACCIDENT AND HEALTH

Commissions are paid on initial base premiums.

POLICY TYPE		PERCENT OF PREMIUM			
Forms 460/461/470/471 (Wisconsin)		1st Year	2nd Yr & After		
Age 54 & Under		83	20.75		
Age 55 - 59		78	19.5		
Age 60 - 64		73	18.25		
Age 65 - 69		68	17		
Age 70 - 74		63	15.75		
Age 75 - 79		58	14.5		
Age 80 - 84		53	13.25		
Age 85 & Over		48	12		
Forms 460/461/470/471 (Michigan)		1st Year	2nd - 3rd Year	4th - 10th Year	11th Yr & After
Age 54 & Under		90	12.5	12.5	3
Age 55 - 59		80	12.5	12.5	3
Age 60 - 64		75	12.5	12.5	3
Age 65 - 79					
Policies issued WITHOUT Return of Premium Rider		30	30	14	14
Policies issued WITH Return of Premium Rider		24	24	8	8
Age 80 & Over					
Policies issued WITHOUT Return of Premium Rider		24	24	8	8
Policies issued WITH Return of Premium Rider		18	18	2	2
TRADITIONAL LONG-TERM CARE		1st Year	2nd Yr & After		
<ul style="list-style-type: none"> <li>Commissions on return of premium rider are not paid after the first year.</li> <li>Policy Form 440, optional rider Form PAR—commissions paid first year ONLY.</li> <li>Includes new sales (not replacements) in Kentucky; for replacement sales, see Indiana.</li> </ul>					
Forms 420/440 or state variations					
Age 50 & Under		75	10		
Age 51 - 55		70	10		
Age 56 - 60		65	10		
Age 61 - 65		60	10		
Age 66 - 70		55	10		
Age 71 - 75		50	10		
Age 76 - 80		45	10		
Age 81 - 84		40	10		
Forms 414/420/440 (Indiana)		1st Year	2nd Yr & After		
(Replacement sales in Kentucky)					
Age 79 & Under					
Policies issued WITHOUT Return of Premium Rider		36	18		
Policies issued WITH Return of Premium Rider		28	14		
Age 80 & Over					
Policies issued WITHOUT Return of Premium Rider		28	14		
Policies issued WITH Return of Premium Rider		24	12		

- Commissions are not paid on any annual trends, quarterly trends, attained age increases, or on additional tobacco premium.
- If a policy is changed to a different plan, 1st Year commissions will be paid only on the amount of the increased premium.
- Note: Submission of applications for policies covered by this Schedule will constitute acceptance by the Agent of the compensation specified herein.
- For persons that become Medicare eligible and continue their current policy, NO COMMISSION will be paid.
- Policy Fees and/or Association Fees are noncommissionable.
- Commissions are based on the age of the oldest insured.
- In Pennsylvania, General Agent

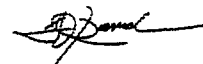
T. J. Parrish  
Sr. Vice President—Marketing

# SCHEDULE OF COMMISSIONS—ACCIDENT AND HEALTH

Commissions are paid on initial base premiums.

POLICY TYPE		PERCENT OF PREMIUM		
Forms 420/440 (Delaware)		1st Year	2nd Yr & After	
	Age 80 & Under	16	16	
	Age 81 - 84	14	14	
Forms 421/446 (Michigan)		1st Year	2nd Yr & After	
	Age 50 & Under	75	10	
	Age 51 - 55	70	10	
	Age 56 - 60	65	10	
	Age 61 - 64	60	10	
		1st - 3rd Year	4th Yr & After	
	Age 65 - 70			
	Policies issued WITHOUT Return of Premium Rider	33	10	
	Policies issued WITH Return of Premium Rider	27	10	
	Age 71 - 75			
	Policies issued WITHOUT Return of Premium Rider	30	10	
	Policies issued WITH Return of Premium Rider	24	10	
	Age 76 - 80			
Forms 428/429/449 (Wisconsin)		1st Year	2nd Yr & After	
	Age 50 & Under	68	17	
	Age 51 - 55	62	15.5	
	Age 56 - 60	56	14	
	Age 61 - 64	50	12.5	
	Age 65 - 70	44	11	
	Age 71 - 75	38	9.5	
	Age 76 - 80	34	8.5	
	Age 81 - 84	30	7.5	
ACUTE RECOVERY CARE, EXTENDED CARE		1st Year	2nd - 10th Year	11th Yr & After
Forms 480/490 or state variations				
Age 54 & Under		88	12.5	2.5
Age 55 - 59		78	12.5	2.5
Age 60 - 64		73	12.5	2.5
Age 65 - 69		68	12.5	2.5
Age 70 - 74		63	12.5	2.5
Age 75 - 79		58	12.5	2.5
Age 80 - 84		48	12.5	2.5
Age 85 & Over		38	12.5	2.5

- Commissions are not paid on any annual trends, quarterly trends, attained age increases, or on additional tobacco premium.
- If a policy is changed to a different plan, 1st Year commissions will be paid only on the amount of the increased premium.
- Note: Submission of applications for policies covered by this Schedule will constitute acceptance by the Agent of the compensation specified herein.
- For persons that become Medicare eligible and continue their current policy, NO COMMISSION will be paid.
- Policy Fees and/or Association Fees are noncommissionable.
- Commissions are based on the age of the oldest insured.
- In Pennsylvania, General Agent



T. J. Parrish  
Sr. Vice President—Marketing



0000014

# SCHEDULE OF COMMISSIONS—ACCIDENT AND HEALTH

Commissions are paid on initial base premiums.

POLICY TYPE	PERCENT OF PREMIUM			
	1st Year	2nd Yr & After		
<b>MAJOR MEDICAL (PROTECTOR, LIBERTY)</b>				
Form 1AG or state variations				
Protector All Provider, Protector PPO Savers,				
Protector PPO Economy, Liberty All Provider,				
Liberty PPO Savers, Liberty PPO Savers Plus	20	7		
Florida	20	6		
Kansas	20	5		
Georgia Form 1AB	20	5.5		
<b>SHORT-TERM MAJOR MEDICAL</b>	1st Yr & After			
Form TMP or state variations	20			
<b>CANCER (LUMP-SUM BENEFIT)</b>	1st Year	2nd Yr & After		
Form 920 or state variations	60	17		
<b>DENTAL</b>	1st Year	2nd Yr & After		
INDIVIDUAL (Grin and Share It series)	16	5		
GROUP ADG1, BDG1, CDG1, DDG1	10	10		
GROUP (5 - 49 lives) (Smile Protector series)	12	11		
GROUP (50 - 99 lives) (Smile Protector series)	10	9		
GROUP (100+ lives) (Smile Protector series)	9	6		

Commissions are not paid on any annual trends, quarterly trends, attained age increases, or on additional tobacco premium.

- If a policy is changed to a different plan, 1st Year commissions will be paid only on the amount of the increased premium.
- Note: Submission of applications for policies covered by this Schedule will constitute acceptance by the Agent of the compensation specified herein.
- For persons that become Medicare eligible and continue their current policy, NO COMMISSION will be paid.
- Policy Fees and/or Association Fees are noncommissionable.
- Commissions are based on the age of the oldest insured.
- In Pennsylvania, General Agent

T. J. Parrish

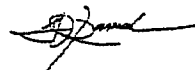
ST0000

**SCHEDULE OF COMMISSIONS—OTHER ACCIDENT AND HEALTH**

Commissions are paid on initial base premiums.

POLICY TYPE	PERCENT OF PREMIUM		
	1st Year	2nd - 10th Year	11th Yr & After
<b>MAJOR MEDICAL TYPE PLANS</b> (all issue ages)			
Kansas	7	4.5	4.5
North Dakota	15	7	7
South Dakota	21	5	5
Florida	18	3	3
Form 12M or state variations	15	7	7
<b>SHORT TERM</b>			
Form S20 or state variations	17	0	0
Form STM/S10	14	0	0
<b>CANCER</b>			
Forms 907/908	65	16	12
Forms 907/908 (Wyoming)	60	11	11
Forms 907/908 (Minnesota)	60	13	9
Forms 909 (Washington)	40	6	6
Forms 913/914 (Florida)	60	13	9
<b>DISABILITY</b>			
Form 208	55	10	5
Form 211 (Florida)	50	7	5
<b>ACCIDENT ONLY</b>			
Forms 810/816	55	15	15
Form 815 (Florida)	50	13	13
<b>MEDICARE SUPPLEMENT (ISSUE AGE) † † †</b>			
Forms 340 - 346 (Maryland)	2	2	
	1st - 6th Year	7th Yr & After	
Forms 340 - 342	12	3.5	
Forms 345 - 346	15	3.5	

- Commissions are not paid on any annual trends, quarterly trends, attained age increases, or on additional tobacco premium.
- If a policy is changed to a different plan, 1st Year commissions will be paid only on the amount of the increased premium.
- Note: Submission of applications for policies covered by this Schedule will constitute acceptance by the Agent of the compensation specified herein.
- For persons that become Medicare eligible and continue their current policy, NO COMMISSION will be paid.
- Policy Fees and/or Association Fees are noncommissionable.
- Commissions are based on the age of the oldest insured.
- † Part B Deductible/Rider is not commissionable.
- †† Commissions are not paid on rate increase except in DE and WA.
- \*\* In Pennsylvania, General Agent



T. J. Parrish  
Sr. Vice President—Marketing

000016

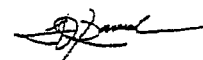
4T0000

**SCHEDULE OF COMMISSIONS—ACCIDENT AND HEALTH**

Commissions are paid on initial base premiums.

POLICY TYPE		PERCENT OF PREMIUM	
<b>MEDICARE SUPPLEMENT (ATTAINED AGE) † ††</b>		1st - 6th Year	7th Yr & After
Forms 3AA/3AB/3AC/3AD/3AF/3AG/3AK or state variations			
Plans A and C		15	3.5
Plans B, D, F, G and High Deductible F		20	3.5
(Wisconsin)			
Forms 3BA,3BK-Part B Deductible Rider not commissionable		22	3.5
(Indiana, North Dakota)		1st Yr & After	
Plans A and C		15	
Plans B, D, F, G and High Deductible F		17	
(Delaware)			
Plans A, B, C, D, F, G and High Deductible F		11	
(Michigan)		1st - 3rd Year	4th Yr & After
Plans A and C		21	3
Plans B, D, F, G and High Deductible F		31	3
<b>MEDICARE SUPPLEMENT (ISSUE AGE) † ††</b>		1st - 6th Year	7th Yr & After
(Arkansas, Connecticut, Georgia, Idaho, Missouri)			
Plans A and C		12	3.5
Plans B, D, F, G and High Deductible F		15	3.5
(Washington)			
All Plans		11	11
Forms 353 - 354 (Florida)		12	3.5
Forms 355 - 356 (Florida)		15	3.5
Forms 351 - 352 (Minnesota)		15	3.5

- Commissions are not paid on any annual trends, quarterly trends, attained age increases, or on additional tobacco premium.
- If a policy is changed to a different plan, 1st Year commissions will be paid only on the amount of the increased premium.
- Note: Submission of applications for policies covered by this Schedule will constitute acceptance by the Agent of the compensation specified herein.
- For persons that become Medicare eligible and continue their current policy, NO COMMISSION will be paid.
- Policy Fees and/or Association Fees are noncommissionable.
- Commissions are based on the age of the oldest insured.
- † Part B Deductible/Rider is not commissionable.
- †† Commissions are not paid on rate increase except in DE and WA.
- In Pennsylvania, General Agent



T. J. Parrish  
Sr. Vice President—Marketing

*Simon* EXHIBIT 9  
DATE 9.22.04  
KIMBERLY K EVANS  
COURT REPORTER

## CONTINENTAL GENERAL INSURANCE COMPANY

MONTHLY RENEWAL PAYMENTS TO ME FOR  
HEALTH & LIFE INSURANCE PREVIOUSLY SOLD,  
FROM 3/03 TO 8/04.

ALL FOR THE MONTH PRIOR TO STATEMENT DATE.

AND FOR NEW BUSINESS, WEEKLY PAYMENTS STATEMENTS.

DANIEL J. SIMON

000101

21-NA 05/96 0

### MONTHLY STATEMENT TOTALS

**AGENT COPY**

# CONTINENTAL GENERAL INSURANCE COMPANY

P.O. BOX 29136 SHAWNEE MISSION, KANSAS 66201-9136

MONTH OF

AGENT  
PAGE

F

PROGRAM NO.

AG2001CG-

COMMISSION STATEMENT

08/04

002

14430

AGENT NAME

DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

AGENT NO.

98219

PRIME NO.

98219

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

MN 55427

TAX ID 47-6467947

21-NA 05/96 0

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNUAL RATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
1449852	DANIEL J SIMON	***												
82721831	J SONNEK	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82721832	B SONNEK	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82725470	V PETTY	RENW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82726409	D MANDELKO	RENW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82837122	A ROESLER	RENW	443	COM	02 99	.060	333.03	.00	19.98	.00	.00	19.98	19	49852
82849324	L BUBOLTZ	RENW	352	ANN	02 00	.220	1204.00	.00	264.88	.00	.00	264.88	2	49852
82849326	A CHIRPICH	RENW	352	COM	01 00	.220	111.78	.00	24.59	.00	.00	24.59	4	49852
82849327	F HOWELL	RENW	352	COM	12 99	.220	87.04	.00	19.15	.00	.00	19.15	16	49852
82849328	F BALDUS	RENW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	27	49852
82849332	J HOWARTH	RENW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	4	49852
82849685	V CONWAY	RENW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82849686	J CONWAY	RENW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	27	49852
82849714	L NELSON	RENW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	16	49852
82849716	R NOVAK	RENW	352	COM	02 00	.220	111.77	.00	24.59	.00	.00	24.59	2	49852
82849719	T OBRIEN	RENW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	11	49852
82849720	N HOLT	RENW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	4	49852
82850149	G LILLIGREN	RENW	352	COM	01 00	.220	127.25	.00	28.00	.00	.00	28.00	23	49852
82850152	C PETERSON	RENW	352	QTR	02 00	.220	919.06	.00	70.19	.00	.00	70.19	3	49852
82850155	D SVOBODA	RENW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	27	49852
82884028	V SPOORS	RENW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82884766	E PASCHKE	RENW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82884767	L PASCHKE	RENW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
83284259	A JERGENSEN	RENW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	4	49852
83284260	M JERGENSEN	RENW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	27	49852
83284261	F SOFFA	RENW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
83284263	M LASNETSKE	RENW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	4	49852
83284265	R MCGOWAN	RENW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
83284486	A ROESLER	RENW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	27	49852
83284489	M THORSEN	RENW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
83284490	B THORSEN	RENW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
83285059	L SCHLUETER	RENW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
83291684	P MARTIN	RENW	352	COM	05 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
83291685	M MARTIN	RENW	352	COM	03 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
83293767	L BRAUN	RENW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
								CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE		
MONTHLY STATEMENT TOTALS														

MONTHLY AGENT EARNINGS:  
YEAR-TO-DATE AGENT EARNINGS

CASH REQUIRED CASH REMITTED  
TO ISSUE POLICY TO HOME OFFICE

AGENT COPY

0014



FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

21-NA 05/96 0

CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE
<b>MONTHLY STATEMENT TOTALS</b>				

**AGENT COPY**

CONTINENTAL GENERAL INSURANCE COMPANY  
P.O. BOX 29136 SHAWNEE, KANSAS 66201-9136  
COMMISSION STATEMENTMONTH OF  
07/04AGENT  
PAGE  
002

14382

AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN

55427

AGENT NO.  
98219PRIME NO.  
98219

TAX ID 47-6467947

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898  
21-NA 05/96 0

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNIVERSARY DATE MO. 1 YR.	COMM %	PREM/ COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
**49852	DANIEL J SIMON	***												
82849327	F HOWELL	RENEW	352	COM	12 99	.220	87.04	.00	19.15	.00	.00	19.15	14	49852
82849328	F BALDUS	RENEW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	27	49852
82849332	J HOWARTH	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	6	49852
82849685	V CONWAY	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
82849686	J CONWAY	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	27	49852
82849714	L NELSON	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	14	49852
82849716	R NOVAK	RENEW	352	COM	02 00	.220	111.77	.00	24.59	.00	.00	24.59	1	49852
82849719	T OBRIEN	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	12	49852
82849720	N HOLT	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	6	49852
82850149	G LILLIGREN	RENEW	352	COM	01 00	.220	127.25	.00	28.00	.00	.00	28.00	21	49852
82850155	D SVOBODA	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	27	49852
82850387	L TIENTER	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
82884023	V SPOORS	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
82884766	E PASCHKE	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
82884767	L PASCHKE	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83284259	A JERGENSEN	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	6	49852
83284260	M JERGENSEN	RENEW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	27	49852
83284261	F SOFFA	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83284263	M LASNETSKE	RENEW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	6	49852
83284265	R MCGOWAN	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83284486	A ROESLER	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	27	49852
83284489	M THORSEN	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83284490	B THORSEN	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83285059	L SCHLUETER	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83291684	P MARTIN	RENEW	352	COM	05 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83291685	M MARTIN	RENEW	352	COM	03 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83293767	L BRAUN	RENEW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83294815	K COLEMAN	RENEW	352	COM	07 00	.220	111.78	.00	24.59	.00	.00	24.59	6	49852
83297050	M WINDSCHITL	RENEW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	12	49852
83308124	G WHITE	RENEW REVSL	352	S/A	12 00	.220	187.83	41.32	.00	.00	.00	41.32	20	49852
83318342	R NELSON	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83532899	S ENSRUD	RENEW	352	COM	08 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83533191	B ENSRUD	RENEW	352	COM	08 00	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
83541177	M SCHWARTZ	RENEW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	6	49852
								CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE		
MONTHLY STATEMENT TOTALS														

MONTHLY AGENT EARNINGS:  
YEAR-TO-DATE AGENT EARNINGSCASH REQUIRED CASH REMITTED  
TO ISSUE POLICY TO HOME OFFICE

AGENT COPY

CONTINENTAL GENERAL INSURANCE COMPANY  
P.O. BOX 29136 SHAWNEE, KANSAS 66201-9136  
COMMISSION STATEMENTMONTH OF  
07/04AGENT  
PAGE  
003

1483

AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS MN 55427AGENT NO.  
98219  
PRIME NO.  
98219  
TAX ID 47-6467947FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898  
21-NA 05/96 0

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ADVERSE DATE MO. YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
***49852	DANIEL J SIMON	***												
83544098	A OFSTIE	RENEW REVSL	352	S/A	02 01	.220	208.69	45.91	.00	.00	.00	45.91	6	49852
	DANIEL J SIMON						5953.91					1622.45		TOTAL
***98219	DANIEL J SIMON	***												
82301688	E MILLER	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	27	98219
82304627	P KNUTH	RENEW REVSL	352	QTR	02 98	.070	306.65	21.46	.00	.00	.00	21.46	19	98219
82304933	H CARON	RENEW	352	COM	04 98	.070	85.42	.00	5.98	.00	.00	5.98	6	98219
82313417	R OBRIEN	RENEW	352	COM	08 98	.070	85.42	.00	5.98	.00	.00	5.98	6	98219
82679839	R JONES	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	6	98219
82818675	W HOHN	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	27	98219
83252684	S JOHNSON	RENEW	352	COM	04 98	.070	85.42	.00	5.98	.00	.00	5.98	6	98219
83252684	S JOHNSON	RENEW REVSL	352	COM	04 98	.070	85.42	5.98	.00	.00	.00	5.98	14	98219
83252684	S JOHNSON	RENEW REVSL	352	MON	04 98	.070	22.78	1.59	.00	.00	.00	1.59	27	98219
	DANIEL J SIMON						87.84					19.83		TOTAL
COMMISSION TOTALS								HEALTH	LIFE	CHARGE/CR	TOTAL			
FIRST YEAR								.00	625.24	.00	625.24			
RENEWAL								1141.78	.00	.00	1141.78			
OTHER								.00	.00	124.74	124.74			



# CONTINENTAL GENERAL INSURANCE COMPANY

PO BOX 29136 \* SHAWNEE MISSION, KS \* 66201 \* 800-284-2898

FIELD UNDERWRITING NOTIFICATION - 06/04/04

AGENT 0049852

APP NO 00911969

PLAN CSR

DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN 55427

APP STATUS: PENDING  
UNDERWRITER: TELEPHONE INTERVIEW  
POLICY BENEFITS: LIFE \$12000

CLOSE DATE: 08/04/04

BILL CODE: COM MODE: MONTHLY

DATE OF  
BIRTH AGE  
0 - GENEVIEVE MEISSNER 02/07/23 81

PREM: 138.60 CWA: 138.60

APP DT: 05/28/04 APP RECVD DT: 06/03/04

PROPOSED EFF DATE: 05/28/04

## APPLICANTS ADDRESS

GENEVIEVE MEISSNER  
333 10TH ST NW #100  
NEW BRIGHTON  
MN 55112

## PLEASE ARRANGE FOR:

THE COMPANY HAS ARRANGED FOR:

TELEPHONE INTERVIEW WITH APPLICANT

MBR

REASON

REQUESTED

RECVD

01

06/04/04

## MESSAGES

UNDERWRITING STATUS LINE - NEW BUSINESS SERVICE DESK 1-800-284-2898  
UNDERWRITING - NEW BUSINESS FAX (913) 722-6170 OR (913) 722-3567  
THANK-YOU, WE APPRECIATE YOUR BUSINESS

SY1002CG  
UND:TEL

AGENT COPY 0049852  
PAGE 1

DIST: 19:MML  
06/04/04

000108



# CONTINENTAL GENERAL INSURANCE COMPANY

P.O. BOX 29136 SHAWNEE MISSION, KANSAS 66201-9136

## COMMISSION STATEMENT

PROGRAM NO.  
AG2001CG-

MONTH OF  
06/04

AGENT  
PAGE  
001

REF  
14321

AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN 55427

AGENT NO.  
98219

PRIME NO.  
98219

TAX ID 47-6467947

21-NA 05/96 0

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNUAL DATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
		PRIOR MONTH BALANCE FORWARD									1812.92	1812.92		
		COMMISSION CK. DIR DEP 05/28/04								1812.92-		1812.92-		
**49852	DANIEL J SIMON	***												
902376	M BASEL	1ST YR	LIFE	COM	09 03	.900	37.53	.00	33.77	.00	.00	33.77	1	49852
902377	C ELLIS	1ST YR	LIFE	COM	09 03	.900	38.17	.00	34.35	.00	.00	34.35	29	49852
902378	M MILLER	1ST YR	LIFE	COM	09 03	.900	67.83	.00	61.04	.00	.00	61.04	1	49852
902696	M KROHN	1ST YR	LIFE	COM	09 03	.900	66.30	.00	59.67	.00	.00	59.67	1	49852
902698	G FOSS	1ST YR	LIFE	COM	09 03	.900	25.59	.00	23.03	.00	.00	23.03	4	49852
903552	E RIECK	1ST YR	LIFE	COM	10 03	.900	76.45	.00	68.80	.00	.00	68.80	1	49852
903553	L RIECK	1ST YR	LIFE	COM	10 03	.900	31.79	.00	28.61	.00	.00	28.61	1	49852
907069	R BREDENBERG	1ST YR	LIFE	COM	11 03	.900	46.38	.00	41.74	.00	.00	41.74	14	49852
908418	E DREWS	1ST YR	LIFE	COM	01 04	.900	30.23	.00	27.20	.00	.00	27.20	21	49852
908419	I DREWS	1ST YR	LIFE	COM	02 04	.900	35.40	.00	31.86	.00	.00	31.86	1	49852
1512601	M KROHN	RENW	352	COM	04 02	.150	117.90	.00	17.69	.00	.00	17.69	1	49852
1520552	E STEELE	RENW	352	COM	05 02	.150	117.90	.00	17.69	.00	.00	17.69	1	49852
1522495	R RICE	RENW	352	COM	07 02	.150	117.90	.00	17.69	.00	.00	17.69	4	49852
82694033	H KROHN	RENW	352	COM	02 99	.250	100.38	.00	25.10	.00	.00	25.10	3	49852
82700094	D MEYER	RENW	352	COM	06 99	.250	100.38	.00	25.10	.00	.00	25.10	4	49852
82705448	D FRENCH	RENW	352	COM	09 99	.250	109.65	.00	27.41	.00	.00	27.41	3	49852
82705449	I FRENCH	RENW	352	COM	09 99	.250	109.65	.00	27.41	.00	.00	27.41	3	49852
82710651	C HENRY	RENW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	1	49852
82710745	R WERTH	RENW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82710746	D WESLEY	RENW	352	COM	02 00	.220	111.77	.00	24.59	.00	.00	24.59	3	49852
82714301	D ANDERSON	RENW	352	COM	05 00	.220	111.77	.00	24.59	.00	.00	24.59	4	49852
82716518	A GOLAY	RENW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	7	49852
82721829	J STECKELBERG	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82721830	M STECKELBERG	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82721831	J SONNEK	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82721832	B SONNEK	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82725470	V PETTY	RENW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82726409	D MANDELKO	RENW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82837122	A ROESLER	RENW	443	COM	02 99	.060	333.03	.00	19.98	.00	.00	19.98	21	49852
82849326	A CHIRPICH	RENW	352	COM	01 00	.220	111.78	.00	24.59	.00	.00	24.59	4	49852
82849327	F HOWELL	RENW	352	COM	12 99	.220	87.04	.00	19.15	.00	.00	19.15	14	49852
82849328	F BALDUS	RENW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	28	49852
								CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE		
MONTHLY STATEMENT TOTALS														

MONTHLY AGENT EARNINGS:  
YEAR-TO-DATE AGENT EARNINGS

CASH REQUIRED CASH REMITTED  
TO ISSUE POLICY TO HOME OFFICE

AGENT COPY

000109

## 14322

14322

21-NA 05/96 0

**AGENT COPY**

000111

[illegible]



**CONTINENTAL GENERAL INSURANCE COMPANY**  
PO BOX 29136 \* SHAWNEE MISSIO'N, KS \* 66201 \* 800-284-2898

FIELD UNDERWRITING NOTIFICATION - 06/15/04

AGENT 0049852

APP NO 00911969

PLAN CSR

DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN 55427

APP STATUS: PENDING  
UNDERWRITER: TELEPHONE INTERVIEW  
POLICY BENEFITS: LIFE \$12000

CLOSE DATE: 08/04/04  
BILL CODE: COM MODE: MONTHLY

O - GENEVIEVE MEISSNER

DATE OF  
BIRTH AGE  
02/07/23 81

PREM: 138.60 CWA: 138.60

APP DT: 05/28/04 APP RECVD DT: 06/03/04

PROPOSED EFF DATE: 05/28/04

APPLICANTS ADDRESS  
GENEVIEVE MEISSNER  
333 10TH ST NW #100  
NEW BRIGHTON  
MN

55112

PLEASE ARRANGE FOR:

	<u>MBR</u>	<u>REASON</u>	<u>REQUESTED</u>	<u>RECVD</u>
<u>THE COMPANY HAS ARRANGED FOR:</u> TELEPHONE INTERVIEW WITH APPLICANT	01		06/04/04	

MESSAGES

APPLICATION TO BE CLOSED. UNABLE TO CONTACT APPLICANT TO  
COMPLETE THE PHONE INTERVIEW. (06/15)

UNDERWRITING STATUS LINE - NEW BUSINESS SERVICE DESK 1-800-284-2898  
UNDERWRITING - NEW BUSINESS FAX (913) 722-6170 OR (913) 722-3567  
THANK-YOU, WE APPRECIATE YOUR BUSINESS

SY1002CG  
UND:TEL

AGENT COPY 0049852  
PAGE 1

DIST: 1900112  
06/15/04



# CONTINENTAL GENERAL INSURANCE COMPANY

PROGRAM NO.  
AG2001CG-

P.O. BOX 29136 SHAWNEE, KANSAS 66201-9136  
**COMMISSION STATEMENT**

MONTH OF  
**05/04**

AGENT  
PAGE  
**001**

Phone  
**14274**

AGENT NAME  
**DANIEL J SIMON**  
**7527 HAROLD AVE**  
**MINNEAPOLIS**

**MN 55427**

AGENT NO.  
**98219**

PRIME NO.  
**98219**

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

TAX ID **47-6467947**

**21-NA 05/96 0**

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNUAL DATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
	PRIOR MONTH BALANCE FORWARD										2060.38	2060.38		
	COMMISSION CK. DIR DEP 04/30/04									2060.38-		2060.38-		
49852	DANIEL J SIMON													
902376	M BASEL	1ST YR	LIFE	COM	09 03	.900	37.53	.00	33.77	.00	.00	33.77	3	49852
902377	C ELLIS	1ST YR	LIFE	COM	09 03	.900	38.17	.00	34.35	.00	.00	34.35	27	49852
902378	M MILLER	1ST YR	LIFE	COM	09 03	.900	67.83	.00	61.04	.00	.00	61.04	3	49852
902696	M KROHN	1ST YR	LIFE	COM	09 03	.900	66.30	.00	59.67	.00	.00	59.67	3	49852
902698	G FOSS	1ST YR	LIFE	COM	09 03	.900	25.59	.00	23.03	.00	.00	23.03	4	49852
903552	E RIECK	1ST YR	LIFE	COM	10 03	.900	76.45	.00	68.80	.00	.00	68.80	3	49852
903553	L RIECK	1ST YR	LIFE	COM	10 03	.900	31.79	.00	28.61	.00	.00	28.61	3	49852
907069	R BREIDENBERG	1ST YR	LIFE	COM	11 03	.900	46.38	.00	41.74	.00	.00	41.74	14	49852
908418	E DREWS	1ST YR	LIFE	COM	01 04	.900	30.23	.00	27.20	.00	.00	27.20	19	49852
908419	I DREWS	1ST YR	LIFE	COM	02 04	.900	35.40	.00	31.86	.00	.00	31.86	3	49852
1512601	M KROHN	RENEW	352	COM	04 02	.150	117.90	.00	17.69	.00	.00	17.69	3	49852
1520552	E STEELE	RENEW	352	COM	05 02	.150	117.90	.00	17.69	.00	.00	17.69	3	49852
1522495	R RICE	RENEW	352	COM	07 02	.150	117.90	.00	17.69	.00	.00	17.69	4	49852
1590906	R STEELE	ISSUED	352	COM	07 04	.150	152.49	.00	22.87	160.91	160.91	22.87	25	49852
2694033	H KROHN	RENEW	352	COM	02 99	.250	100.38	.00	25.10	.00	.00	25.10	3	49852
2700094	D MEYER	RENEW	352	COM	06 99	.250	100.38	.00	25.10	.00	.00	25.10	4	49852
2705448	D FRENCH	RENEW	352	COM	09 99	.250	109.65	.00	27.41	.00	.00	27.41	3	49852
2705449	I FRENCH	RENEW	352	COM	09 99	.250	109.65	.00	27.41	.00	.00	27.41	3	49852
2710651	C HENRY	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
2710745	R WERTH	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
2710746	D WESLEY	RENEW	352	COM	02 00	.220	111.77	.00	24.59	.00	.00	24.59	3	49852
2714301	D ANDERSON	RENEW	352	COM	05 00	.220	111.77	.00	24.59	.00	.00	24.59	4	49852
2716513	A GOLAY	RENEW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
2721829	J STECKELBERG	RENEW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
2721830	M STECKELBERG	RENEW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
2721831	J SONNEK	RENEW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
2721832	B SONNEK	RENEW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
2725470	V PETTY	RENEW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
2726409	D MANDELKO	RENEW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
2837122	A ROESLER	RENEW	448	COM	02 99	.060	393.03	.00	19.98	.00	.00	19.98	19	49852
2849326	A CHIRPICH	RENEW	352	COM	01 00	.220	111.78	.00	24.59	.00	.00	24.59	4	49852
2849327	F HOWELL	RENEW	352	COM	12 99	.220	87.04	.00	19.15	.00	.00	19.15	14	49852
								CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE		
MONTHLY STATEMENT TOTALS														

MONTHLY AGENT EARNINGS:  
YEAR-TO-DATE AGENT EARNINGS

CASH REQUIRED TO ISSUE POLICY  
CASH REMITTED TO HOME OFFICE

AGENT COPY

## 21-NA 05/96 0

AGENT COPY

PAGE  
14276

21-NA 05/96 0

ASCERT COPY



DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS MN 55427  
82219 98219  
TAX ID 47-6467947  
21-NA 05/96 0

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM/PERIOD	TYPE POLICY	MODE	ANNIVERSARY DATE MO, YR	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS			
82219	DANIEL J SIMON	PRIOR MONTH BALANCE FORWARD								2127.49		
82219	DANIEL J SIMON	COMMISSION CK. DIR DEP ***								2127.49		
902376	M BASEL	1ST YR	LIFE	COM	09 03	.900	37.53	.00	33.77	33.77	1	49852
902377	C ELLIS	1ST YR	LIFE	MON	09 03	.900	38.17	.00	34.35	34.35	5	49852
902377	C ELLIS	1ST YR	LIFE	MON	09 03	.900	38.17	.00	34.35	34.35	27	49852
902378	M WILLER	1ST YR	LIFE	COM	09 03	.900	57.83	.00	51.04	51.04	1	49852
902696	M KROHN	1ST YR	LIFE	COM	09 03	.900	66.30	.00	59.67	59.67	1	49852
902698	G FOSS	1ST YR	LIFE	COM	09 03	.900	35.59	.00	33.03	33.03	5	49852
903552	E RIECK	1ST YR	LIFE	COM	10 03	.900	76.45	.00	68.80	68.80	1	49852
903553	E RIECK	1ST YR	LIFE	COM	10 03	.900	31.79	.00	28.61	28.61	1	49852
907069	R BREDEBERG	1ST YR	LIFE	COM	11 03	.900	46.38	.00	41.74	41.74	14	49852
908418	E DREWS	1ST YR	LIFE	COM	01 04	.900	30.23	.00	27.20	27.20	19	49852
908419	I DREWS	1ST YR	LIFE	COM	02 04	.900	35.40	.00	31.86	31.86	1	49852
1520352	E STEELE	RENEW	352	COM	04 02	.150	117.90	.00	17.69	17.69	1	49852
1520395	R RICE	RENEW	352	COM	07 02	.150	117.90	.00	17.69	17.69	5	49852
82691447	V OLSON	RENEW	352	QTR	11 98	.250	266.33	.00	66.58	66.58	29	49852
82691448	H KROHN	RENEW	352	COM	02 99	.250	100.38	.00	25.10	25.10	5	49852
82700094	D MEYER	RENEW	352	COM	06 99	.250	100.38	.00	25.10	25.10	5	49852
82705448	D FRENCH	RENEW	352	COM	09 99	.250	109.65	.00	27.41	27.41	5	49852
82705449	I FRENCH	RENEW	352	COM	09 99	.250	109.65	.00	27.41	27.41	5	49852
82710651	G HENRY	RENEW	352	COM	01 00	.220	102.34	.00	22.51	22.51	1	49852
82710745	R WERTH	RENEW	352	COM	02 00	.220	102.34	.00	22.51	22.51	5	49852
82710746	D WESLEY	RENEW	352	COM	02 00	.220	102.34	.00	22.51	22.51	5	49852
82714301	D ANDERSON	RENEW	352	COM	05 00	.220	111.77	.00	24.59	24.59	5	49852
82716513	A GOLAY	RENEW	352	COM	07 00	.220	102.34	.00	22.51	22.51	5	49852
82721829	J STECKELBERG	RENEW	352	COM	10 00	.220	102.34	.00	22.51	22.51	5	49852
82721830	M STECKELBERG	RENEW	352	COM	10 00	.220	102.34	.00	22.51	22.51	5	49852
82721831	J SONNEK	RENEW	352	COM	10 00	.220	102.34	.00	22.51	22.51	5	49852
82721832	B SONNEK	RENEW	352	COM	10 00	.220	102.34	.00	22.51	22.51	5	49852
82725470	V PETTY	RENEW	352	COM	01 01	.230	102.34	.00	22.51	22.51	5	49852
82726409	D MANDELKO	RENEW	352	COM	01 01	.230	102.34	.00	22.51	22.51	5	49852
82837122	A ROESLER	RENEW	443	COM	02 99	.060	333.03	.00	19.98	19.98	19	49852
82849326	A CHIRPICH	RENEW	352	COM	01 00	.230	111.78	.00	24.59	24.59	5	49852

CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE
MONTHLY STATEMENT TOTALS				

MONTHLY AGENT EARNINGS  
YEAR-TO-DATE AGENT EARNINGS  
CASH REQUIRED TO ISSUE POLICY  
CASH REMITTED TO HOME OFFICE

CONTINENTAL GENERAL INSURANCE COMPANY  
P.O. BOX 29136 SHAWNEE SSION, KANSAS 66201-9136  
COMMISSION STATEMENTMONTH OF  
04/04AGENT  
PAGE  
002REPORT  
11.30AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN

55427

AGENT NO.  
98219PRIME NO.  
98219

TAX ID 47-6467947

21-NA 05/96 0

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNUAL DATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
**49882	DANIEL J SIMON	***												
82849327	F HOWELL	RENEW	352	COM	12 99	.220	87.04	.00	19.15	.00	.00	19.15	14	49852
82849328	F BALDUS	RENEW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	27	49852
82849332	J HOWARTH	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	5	49852
82849685	V CONWAY	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82849686	J CONWAY	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	27	49852
82849714	L NELSON	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	14	49852
82849716	R NOVAK	RENEW	352	COM	02 00	.220	111.77	.00	24.59	.00	.00	24.59	1	49852
82849719	T OBRIEN	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	12	49852
82849720	N HOLT	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	5	49852
82850149	G LILLIGREN	RENEW	352	COM	01 00	.220	127.25	.00	28.00	.00	.00	28.00	21	49852
82850155	D SVOBODA	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	27	49852
82850337	L TIENTER	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82884023	V SPOORS	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82884766	E PASCHKE	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82884767	L PASCHKE	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83277453	G ANDERSON	RENEW	352	ANN	10 99	.250	1024.00	.00	256.00	.00	.00	256.00	1	49852
83283577	J JAEGER	RENEW	352	MON	01 00	.220	108.36	.00	23.84	.00	.00	23.84	19	49852
83284259	A JERGENSEN	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	5	49852
83284260	M JERGENSEN	RENEW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	27	49852
83284261	F SOFFA	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83284263	M LASNETSKE	RENEW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	5	49852
83284265	R MCGOWAN	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83284486	A ROESLER	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	27	49852
83284489	M THORSEN	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83284490	B THORSEN	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83285069	L SCHLUETER	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83291684	P MARTIN	RENEW	352	COM	05 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83291685	M MARTIN	RENEW	352	COM	03 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83293767	L BRAUN	RENEW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83294815	K COLEMAN	RENEW	352	COM	07 00	.220	111.78	.00	24.59	.00	.00	24.59	5	49852
83297050	M WINDSCHITL	RENEW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	12	49852
83318342	R NELSON	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83532899	S ENSRUD	RENEW	352	COM	08 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83583191	B ENSRUD	RENEW	352	COM	08 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
								CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE		
MONTHLY STATEMENT TOTALS														

MONTHLY AGENT EARNINGS:  
YEAR-TO-DATE AGENT EARNINGSCASH REQUIRED CASH REMITTED  
TO ISSUE POLICY TO HOME OFFICE

AGENT COPY

AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN 55427

98219 98219  
TAX ID 47-6467947

21-NA 05/96 0

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNISSUE DATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
49852	DANIEL J SIMON	***												
83541177	M SCHWARTZ	RENEW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
	DANIEL J SIMON						7686.86					2000.02		TOTAL
98219	DANIEL J SIMON	***												
82301688	E MILLER	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	27	98219
82304627	P KNUTH	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	27	98219
82304933	H CARON	RENEW	352	COM	04 98	.070	85.42	.00	5.98	.00	.00	5.98	5	98219
82313417	R OBRIEN	RENEW	352	COM	08 98	.230	85.42	.00	19.65	.00	.00	19.65	5	98219
82676388	J HENKE	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	15	98219
82679839	R JONES	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	5	98219
82818675	W HOHN	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	27	98219
83252684	S JOHNSON	RENEW	352	COM	04 98	.070	85.42	.00	5.98	.00	.00	5.98	5	98219
	DANIEL J SIMON						666.81					60.36		TOTAL
COMMISSION TOTALS								HEALTH	LIFE	CHARGE/CR	TOTAL			
FIRST YEAR								.00	444.42	.00	444.42			
RENEWAL								1615.96	.00	.00	1615.96			
OTHER								.00	.00	.00	.00			



CONTINENTAL GENERAL INSURANCE COMPANY  
P.O. BOX 29136 SHAWNEE SION, KANSAS 66201-9136  
COMMISSION STATEMENTMONTH OF  
03/04AGENT  
PAGE  
001REP  
1AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS MN 55427AGENT NO.  
98219PRIME NO.  
98219

FOR QUESTIONS REGARDING COMMISSIONS. CALL 1-800-284-2898

TAX ID 47-6467947

21-NA 05/96 0

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNIV DATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
		PRIOR MONTH BALANCE FORWARD									2179.99	2179.99		
		COMMISSION CK. DIR DEP 03/01/04								2179.99-		2179.99-		
**49852	DANIEL J SIMON	***												
902376	M BASEL	1ST YR	LIFE	COM	09 03	.900	37.53	.00	33.77	.00	.00	33.77	1	49852
902377	C ELLIS	1ST YR	LIFE	MON	09 03	.900	38.17	.00	34.35	.00	.00	34.35	1	49852
902378	M MILLER	1ST YR	LIFE	COM	09 03	.900	67.83	.00	61.04	.00	.00	61.04	1	49852
902696	M KROHN	1ST YR	LIFE	COM	09 03	.900	66.30	.00	59.67	.00	.00	59.67	1	49852
902698	G FOSS	1ST YR	LIFE	COM	09 03	.900	25.59	.00	23.03	.00	.00	23.03	4	49852
903552	E RIECK	1ST YR	LIFE	COM	10 03	.900	76.45	.00	68.80	.00	.00	68.80	1	49852
903553	L RIECK	1ST YR	LIFE	COM	10 03	.900	31.79	.00	28.61	.00	.00	28.61	1	49852
907069	R BREIDENBERG	1ST YR	LIFE	COM	11 03	.900	48.38	.00	41.74	.00	.00	41.74	15	49852
908418	E DREWS	1ST YR	LIFE	COM	01 04	.900	30.23	.00	27.20	.00	.00	27.20	19	49852
908419	T DREWS	1ST YR	LIFE	COM	02 04	.900	35.40	.00	31.86	.00	.00	31.86	1	49852
1512601	M KROHN	RENW	352	COM	04 02	.150	117.90	.00	17.69	.00	.00	17.69	1	49852
1520552	E STEELE	RENW	352	COM	05 02	.150	117.90	.00	17.69	.00	.00	17.69	1	49852
1522495	R RICE	RENW	352	COM	07 02	.150	117.90	.00	17.69	.00	.00	17.69	4	49852
82694038	H KROHN	RENW	352	COM	02 99	.250	100.38	.00	25.10	.00	.00	25.10	3	49852
82700094	D MEYER	RENW	352	COM	06 99	.250	100.38	.00	25.10	.00	.00	25.10	4	49852
82705448	D FRENCH	RENW	352	COM	09 99	.250	109.65	.00	27.41	.00	.00	27.41	3	49852
82705449	I FRENCH	RENW	352	COM	09 99	.250	109.65	.00	27.41	.00	.00	27.41	3	49852
82710651	C HENRY	RENW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	1	49852
82710745	R WERTH	RENW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82710746	D WESLEY	RENW	352	COM	02 00	.220	111.77	.00	24.59	.00	.00	24.59	3	49852
82714301	D ANDERSON	RENW	352	COM	05 00	.220	111.77	.00	24.59	.00	.00	24.59	4	49852
82716519	A GOLAY	RENW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82721829	J STECKELBERG	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82721830	M STECKELBERG	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82721831	J SONNEK	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82721832	B SONNEK	RENW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82725470	V PETTY	RENW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82726409	D MANDELKO	RENW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82837122	A ROESLER	RENW	443	COM	02 99	.060	333.03	.00	19.98	.00	.00	19.98	19	49852
82849326	A CHIRPICH	RENW	352	COM	01 00	.220	111.78	.00	24.59	.00	.00	24.59	4	49852
82849327	F HOWELL	RENW	352	COM	12 99	.220	87.04	.00	19.15	.00	.00	19.15	15	49852
82849328	F BALDUS	RENW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	29	49852
								CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)			
MONTHLY STATEMENT TOTALS														

MONTHLY AGENT EARNINGS:  
YEAR-TO-DATE AGENT EARNINGSCASH REQUIRED CASH REMITTED  
TO ISSUE POLICY TO HOME OFFICE

AGENT COPY

000420

**AGENT COPY**



# CONTINENTAL GENERAL INSURANCE COMPANY

P.O. BOX 29136 SHAWNEE, KANSAS 66201-9136

MONTH OF

AGENT

R

PROGRAM NO

AG2001CG-

03/04

003

13952

## COMMISSION STATEMENT

AGENT NAME

DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

AGENT NO.

98219

PRIME NO.

98219

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

MN

55427

TAX ID

47-6467947

21-NA 05/96 0

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNUAL DATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
**98219	DANIEL J SIMON	***												
82301688	E MILLER	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	29	98219
82304627	P KNUTH	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	29	98219
82304933	H CARON	RENEW	352	COM	04 98	.230	85.42	.00	19.65	.00	.00	19.65	3	98219
82313417	R OBRIEN	RENEW	352	COM	08 98	.230	85.42	.00	19.65	.00	.00	19.65	3	98219
82676388	J HENKE	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	15	98219
82679839	R JONES	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	5	98219
82818675	W HOHN	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	29	98219
82818677	L RASMUSSEN	RENEW	352	QTR	02 98	.070	255.99	.00	17.92	.00	.00	17.92	8	98219
83252684	S JOHNSON	RENEW	352	COM	04 98	.230	85.42	.00	19.65	.00	.00	19.65	4	98219
	DANIEL J SIMON						922.80					105.82		TOTAL
COMMISSION TOTALS								HEALTH	LIFE	CHARGE/CR	TOTAL			
FIRST YEAR								.00	410.07	.00	410.07			
RENEWAL								1717.42	.00	.00	1717.42			
OTHER								.00	.00	.00	.00			

.00	2127.49	2179.99-	2179.99	2127.49
CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE
MONTHLY STATEMENT TOTALS				DIR DEP

MONTHLY AGENT EARNINGS: 2127.49  
YEAR-TO-DATE AGENT EARNINGS: 7437.75

CASH REQUIRED TO ISSUE POLICY  
CASH REMITTED TO HOME OFFICE

OFFICE  
990101

AGENT COPY

000121

AG1001CG

CONTINENTAL GENERAL INSURANCE CO.  
ADVANCE COMMISSION STATEMENT  
FOR ACCOUNTING MONTH OF FEBRUARY , 2004  
PRODUCTION DATE 02/10/2004  
PRODUCED 02/10/2004 AT 18:55:51

AGENT: DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN 554274858

AGT #: 0049852  
DANIEL J SIMON

PLAN	POLICY	NUMBER	POLICYHOLDER NAME	MODE	MODE	ANLIZ	ADVANCE
					PREMIUM	PREMIUM	AMOUNT
218138	00908419	IRENE E	DREWS	COM	35.40	424.80	32.19
208138	00908418	EUGENE H	DREWS	COM	30.23	362.76	27.63

TOTAL PAYABLE (19601)  
CHECK NUMBER

59.82  
DIR DEP

\*CONVERSION  
\*\*\*EXCHANGE

DIST: 21

000122

# CONTINENTAL GENERAL INSURANCE COMPANY

PROGRAM N  
AG2001CG-

P.O. BOX 29136 SHAWNEE, KANSAS 66201-9136  
COMMISSION STATEMENT

AGENT  
PAGE  
001

REPORT  
1-1-86

MONTH OF  
02/04

AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN 55427

AGENT NO. 98219  
PRIME NO. 98219  
TAX ID 47-6467947

21-NA 05/96 0

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNUAL DATE MO, 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WHITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
		PRIOR MONTH BALANCE FORWARD												
		COMMISSION CK. DIR DEP 01/31/04								3071.21-	3071.21	3071.21		
		DANIEL J SIMON ***								3071.21-		3071.21-		
902376	M BASEL	1ST YR	LIFE	COM	09 03	.900	37.53	.00	33.77	.00	.00	33.77	2	49852
902378	M MILLER	1ST YR	LIFE	COM	09 03	.900	67.83	.00	61.04	.00	.00	61.04	2	49852
902696	M KROHN	1ST YR	LIFE	COM	09 03	.900	66.30	.00	59.67	.00	.00	59.67	2	49852
902698	G FOSS	1ST YR	LIFE	COM	09 03	.900	25.59	.00	23.03	.00	.00	23.03	4	49852
903552	E RIECK	1ST YR	LIFE	COM	10 03	.900	76.45	.00	68.80	.00	.00	68.80	2	49852
903553	L RIECK	1ST YR	LIFE	COM	10 03	.900	31.79	.00	28.61	.00	.00	28.61	2	49852
907069	R BREDENBERG	1ST YR	LIFE	COM	11 03	.900	46.38	.00	41.74	.00	.00	41.74	16	49852
908418	E DREWS	ISSUED	LIFE	COM	01 04	.900	30.23	.00	27.20	30.23	30.66	27.63	10	49852
908418		ADV INT COMM				.000	.00	.00	.00	27.63-	.00	27.63-	10	49852
908418	E DREWS	1ST YR	LIFE	COM	01 04	.900	30.23	.00	27.20	.00	.00	27.20	19	49852
908419	I DREWS	ISSUED	LIFE	COM	02 04	.900	35.40	.00	31.86	35.40	35.73	32.19	10	49852
908419		ADV INT COMM				.000	.00	.00	.00	32.19-	.00	32.19-	10	49852
1512601	M KROHN	RENEW	352	COM	04 02	.150	117.90	.00	17.69	.00	.00	17.69	2	49852
1520552	E STEELE	RENEW	352	COM	05 02	.150	117.90	.00	17.69	.00	.00	17.69	2	49852
1522495	R RICE	RENEW	352	COM	07 02	.150	117.90	.00	17.69	.00	.00	17.69	4	49852
82691447	V OLSON	RENEW	352	QTR	11 98	.250	266.33	.00	66.58	.00	.00	66.58	2	49852
82694033	H KROHN	RENEW	352	COM	02 99	.250	100.38	.00	25.10	.00	.00	25.10	3	49852
82700094	D MEYER	RENEW	352	COM	06 99	.250	100.38	.00	25.10	.00	.00	25.10	4	49852
82705448	D FRENCH	RENEW	352	COM	09 99	.250	109.65	.00	27.41	.00	.00	27.41	3	49852
82705449	I FRENCH	RENEW	352	COM	03 99	.250	109.65	.00	27.41	.00	.00	27.41	3	49852
82710651	C HENRY	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	2	49852
82710745	R WERTH	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82710746	D WESLEY	RENEW	352	COM	02 00	.220	111.77	.00	24.59	.00	.00	24.59	3	49852
82714301	D ANDERSON	RENEW	352	COM	05 00	.220	111.77	.00	24.59	.00	.00	24.59	4	49852
82716513	A GOLAY	RENEW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82721829	J STECKELBERG	RENEW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82721830	M STECKELBERG	RENEW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82721891	J SONNEK	RENEW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82721832	B SONNEK	RENEW	352	COM	10 00	.220	102.34	.00	22.51	.00	.00	22.51	3	49852
82725470	V PETTY	RENEW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82726409	D MANDELKO	RENEW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
82837122	A ROESLER	RENEW	443	COM	02 99	.060	333.03	.00	19.98	.00	.00	19.98	19	49852

CHARGES(-) CREDITS(+) CHARGES(-) CREDITS(+)

NET AMT DUE

MONTHLY STATEMENT TOTALS

MONTHLY AGENT EARNINGS:  
YEAR-TO-DATE AGENT EARNINGS

CASH REQUIRED CASH REMITTED  
TO ISSUE POLICY TO HOME OFFICE

AGENT COPY

000124

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2858

AGENT NO. 98219  
PRIME NO. 98219

AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

TAX ID 55427  
47-6467947  
21-NA 05/96 0

INSURED'S NAME	DESCRIPTION	TYPE	MODE	ANNUAL DATE	MO. YR.	%	PREM/COM	AMOUNT	MONTHLY EARNINGS	CHARGES	CREDITS	AGENT ACCOUNT	AMOUNT	DUE AGENT	TX	WRITING AGENT
----------------	-------------	------	------	-------------	---------	---	----------	--------	------------------	---------	---------	---------------	--------	-----------	----	---------------

82849326	A CHIRPICH	RENEW	352	COM	01	00	.220	111.78	.00	.00	24.59		24.59	4		49852
82849327	F HOWELL	RENEW	352	COM	12	99	.220	95.11	.00	.00	20.92		20.92	27		49852
82849328	F BALDUS	RENEW	352	COM	01	00	.220	102.34	.00	.00	22.51		22.51	4		49852
82849332	U HOWARTH	RENEW	352	COM	01	00	.220	102.34	.00	.00	22.51		22.51	4		49852
82849685	V CONWAY	RENEW	352	COM	01	00	.220	102.34	.00	.00	22.51		22.51	27		49852
82849686	U CONWAY	RENEW	352	COM	01	00	.220	102.34	.00	.00	22.51		22.51	16		49852
82849714	L NELSON	RENEW	352	COM	01	00	.220	111.77	.00	.00	24.59		24.59	2		49852
82849716	R NGVAK	RENEW	352	COM	02	00	.220	111.77	.00	.00	24.59		24.59	11		49852
82849719	T OBRLEN	RENEW	352	COM	01	00	.220	102.34	.00	.00	22.51		22.51	4		49852
82849720	N HOLT	RENEW	352	COM	01	00	.220	111.77	.00	.00	24.59		24.59	4		49852
82850149	G LILLIGREN	RENEW	352	COM	01	00	.220	127.25	.00	.00	28.00		28.00	23		49852
82850155	O SVOBODA	RENEW	352	COM	01	00	.220	102.34	.00	.00	22.51		22.51	27		49852
82850337	L TIENTER	RENEW	352	COM	01	00	.220	102.34	.00	.00	22.51		22.51	4		49852
82884028	V SPORNS	RENEW	352	COM	03	01	.220	102.34	.00	.00	22.51		22.51	4		49852
82884766	E PASCHKE	RENEW	352	COM	03	01	.220	102.34	.00	.00	22.51		22.51	4		49852
82884767	L PASCHKE	RENEW	352	COM	03	01	.220	102.34	.00	.00	22.51		22.51	4		49852
83284258	A STUTZLIEM	RENEW	352	ANN	02	00	.220	1497.00	.00	.00	329.34		329.34	26		49852
83284259	A JERGENSON	RENEW	352	COM	01	00	.220	111.77	.00	.00	24.59		24.59	4		49852
83284260	M JERGENSON	RENEW	352	COM	12	99	.220	95.11	.00	.00	20.92		20.92	27		49852
83284261	F SOFFA	RENEW	352	COM	02	00	.220	102.34	.00	.00	22.51		22.51	4		49852
83284263	M LASNETSKE	RENEW	352	COM	01	99	.220	95.11	.00	.00	20.92		20.92	4		49852
83284265	R MCGOWAN	RENEW	352	COM	01	00	.220	102.34	.00	.00	22.51		22.51	4		49852
83284486	A ROESLER	RENEW	352	COM	01	00	.220	111.77	.00	.00	24.59		24.59	27		49852
83284489	A THORSEN	RENEW	352	COM	02	00	.220	102.34	.00	.00	22.51		22.51	4		49852
83284490	B THORSEN	RENEW	352	COM	01	00	.220	102.34	.00	.00	22.51		22.51	4		49852
83284559	L SCHULTER	RENEW	352	COM	05	00	.220	102.34	.00	.00	22.51		22.51	4		49852
83291684	P MARTIN	RENEW	352	COM	03	00	.220	102.34	.00	.00	22.51		22.51	4		49852
83293767	L BRAUN	RENEW	352	COM	07	00	.220	111.78	.00	.00	24.59		24.59	4		49852
83294816	K COLEMAN	RENEW	352	COM	07	00	.220	102.34	.00	.00	22.51		22.51	10		49852
83297050	M WINDSCHILL	RENEW	352	COM	07	00	.220	102.34	.00	.00	22.51		22.51	4		49852
83318342	R NELSON	RENEW	352	COM	08	01	.220	102.34	.00	.00	22.51		22.51	4		49852
83532899	S ENSRUD	RENEW	352	COM	08	00	.220	102.34	.00	.00	22.51		22.51	4		49852
83533191	B ENSRUD	RENEW	352	COM	08	00	.220	102.34	.00	.00	22.51		22.51	4		49852

MONTHLY STATEMENT TOTALS	CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE
	CHARGES	CREDITS	CHARGES	CREDITS	

MONTHLY AGENT EARNINGS:  
YEAR-TO-DATE AGENT EARNINGS  
CASH REQUIRED TO ISSUE POLICY  
CASH REMITTED TO HOME OFFICE



# CONTINENTAL GENERAL INSURANCE COMPANY

PROGRAM N.  
AG2001CG-

P.O. BOX 29136 SHAWNEE MISSION, KANSAS 66201-9136  
**COMMISSION STATEMENT**

MONTH OF  
02/04

AGENT  
PAGE  
003

136997

AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN

55427

AGENT NO.  
98219

PRIME NO.  
98219

TAX ID 47-6467947

21-NA 05/96 0

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

000121000

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ADMISSION DATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
**49852	DANIEL J SIMON	***												
83541177	M SCHWARTZ	RENEW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	4	49852
83544098	A OFSTIE	RENEW	352	S/A	02 01	.220	626.08	.00	137.74	.00	.00	137.74	20	49852
	DANIEL J SIMON						8565.84					2086.70		TOTAL
**98219	DANIEL J SIMON	***												
82301688	E MILLER	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	27	98219
82304503	R JACOBSON	RENEW REVSL	352	MON	02 98	.230	32.84	7.55	.00	.00	.00	7.55	23	98219
82304627	P KNUTH	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	27	98219
82304933	H CARON	RENEW	352	COM	04 98	.230	85.42	.00	19.65	.00	.00	19.65	3	98219
82313417	R OBRIEN	RENEW	352	COM	08 98	.230	85.42	.00	19.65	.00	.00	19.65	3	98219
82676388	J HENKE	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	16	98219
82679838	R JONES	RENEW	352	COM	02 98	.230	82.11	.00	18.89	.00	.00	18.89	5	98219
82818675	W HOHN	RENEW	352	COM	02 98	.070	82.11	.00	5.75	.00	.00	5.75	27	98219
83252684	S JOHNSON	RENEW	352	COM	04 98	.230	85.42	.00	19.65	.00	.00	19.65	4	98219
	DANIEL J SIMON						633.97					93.29		TOTAL
COMMISSION TOTALS								HEALTH	LIFE	CHARGE/CR	TOTAL			
FIRST YEAR								.00	402.92	.00	402.92			
RENEWAL								1836.13	.00	.00	1836.13			
OTHER								.00	.00	59.06	59.06			



PROGRAM NO.  
AG2001CG-

# CONTINENTAL GENERAL INSURANCE COMPANY

P.O. BOX 28136 SHAWNEE, KANSAS 66201-9136

MONTH OF  
01/04

AGENT  
PAGE  
002

RE  
P.  
13955

## COMMISSION STATEMENT

AGENT NAME  
DANIEL J SIMON  
7527 HAROLD AVE  
MINNEAPOLIS

MN 55427

AGENT NO.  
98219

PRIME NO.  
98219

TAX ID 47-6467947

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

21-NA 05/96 0

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNUAL DATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
49852	DANIEL J SIMON	***												
82849685	V CONWAY	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82849686	J CONWAY	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	27	49852
82849714	L NELSON	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	14	49852
82849716	R NOVAK	RENEW	352	COM	02 00	.220	111.77	.00	24.59	.00	.00	24.59	5	49852
82849719	T OBRIEN	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	12	49852
82849720	N HOLT	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	5	49852
82850148	E SCHDER	RENEW	352	ANN	01 00	.220	1204.00	.00	264.88	.00	.00	264.88	6	49852
82850149	G LILLIGREN	RENEW	352	COM	01 00	.220	127.25	.00	28.00	.00	.00	28.00	21	49852
82850152	C PETERSON	RENEW	352	S/A	02 00	.220	626.08	.00	137.74	.00	.00	137.74	26	49852
82850155	D SYOBODA	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	27	49852
82850337	L TIENTER	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82850540	G STEUERNAGEL	RENEW	352	ANN	02 00	.220	1709.00	.00	375.98	.00	.00	375.98	20	49852
82884023	V SPOORS	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82884766	E PASCHKE	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
82884767	L PASCHKE	RENEW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83283315	G KJOS	RENEW REVSL	352	ANN	01 00	.220	1204.00	264.88	.00	.00	.00	264.88	7	49852
83283315	G KJOS	RENEW	352	ANN	01 00	.220	1204.00	.00	264.88	.00	.00	264.88	23	49852
83283316	E KJOS	RENEW REVSL	352	ANN	01 00	.220	1204.00	264.88	.00	.00	.00	264.88	7	49852
83283316	E KJOS	RENEW	352	ANN	01 00	.220	1204.00	.00	264.88	.00	.00	264.88	23	49852
83283341	M BLASING	RENEW	352	ANN	01 00	.220	1204.00	.00	264.88	.00	.00	264.88	5	49852
83284259	A JERGENSEN	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	5	49852
83284260	M JERGENSEN	RENEW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	27	49852
83284261	F SOFFA	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83284269	M LASNETSKY	RENEW	352	COM	12 99	.220	95.11	.00	20.92	.00	.00	20.92	5	49852
83284265	R MCGOWAN	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83284486	A ROESLER	RENEW	352	COM	01 00	.220	111.77	.00	24.59	.00	.00	24.59	27	49852
83284489	M THORSEN	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83284490	B THORSEN	RENEW	352	COM	02 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83285059	L SCHLUETER	RENEW	352	COM	01 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83291684	P MARTIN	RENEW	352	COM	05 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83291685	M MARTIN	RENEW	352	COM	03 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83293767	L BRAUN	RENEW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83294815	K COLEMAN	RENEW	352	COM	07 00	.220	111.78	.00	24.59	.00	.00	24.59	5	49852
83297050	M WINDSCHITL	RENEW	352	COM	07 00	.220	102.34	.00	22.51	.00	.00	22.51	12	49852
								CHARGES(-)	CREDITS(+)	CHARGES(-)	CREDITS(+)	NET AMT DUE		
MONTHLY STATEMENT TOTALS														

MONTHLY AGENT EARNINGS:  
YEAR-TO-DATE AGENT EARNINGS

CASH REQUIRED CASH REMITTED  
TO ISSUE POLICY TO HOME OFFICE

AGENT COPY

000127



PROGRAM NO.

AG2001CG-

# CONTINENTAL GENERAL SURETY COMPANY

P.O. BOX 29136 SHAWNEE M. ION, KANSAS 66201-9136

MONTH OF

01/04

AGENT

PAGE

003

REP

PA

139Ld

AGENT NAME

DANIEL J SIMON

7527 HAROLD AVE

MINNEAPOLIS

AGENT NO.

98219

PRIME NO.

98219

FOR QUESTIONS REGARDING COMMISSIONS: CALL 1-800-284-2898

MN 55427

TAX ID 47-6467947

21-NA 05/96 0

POLICY NUMBER	INSURED'S NAME	DESCRIPTION COMM.PERIOD	TYPE POLICY	MODE	ANNUAL RATE MO. 1 YR.	COMM %	PREM/COMM AMOUNT	MONTHLY EARNINGS		AGENT ACCOUNT		AMOUNT DUE AGENT	TX DAY	WRITING AGENT
								CHARGES	CREDITS	CHARGES	CREDITS			
**49852	DANIEL J SIMON	***												
83318342	R NELSON	RENW	352	COM	03 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83532899	S ENSRUD	RENW	352	COM	08 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83533191	B ENSRUD	RENW	352	COM	08 00	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
83541177	M SCHWARTZ	RENW	352	COM	01 01	.220	102.34	.00	22.51	.00	.00	22.51	5	49852
	DANIEL J SIMON						12108.45					2898.92		TOTAL
**98219	DANIEL J SIMON	***												
82301688	E MILLER	RENW	352	COM	02 98	.230	82.11	.00	18.89	.00	.00	18.89	27	98219
82304503	R JACOBSON	RENW	352	COM	02 98	.230	82.11	.00	18.89	.00	.00	18.89	27	98219
82304627	P KNUTH	RENW	352	COM	02 98	.230	82.11	.00	18.89	.00	.00	18.89	27	98219
82304933	H CARON	RENW	352	COM	04 98	.230	85.42	.00	19.65	.00	.00	19.65	5	98219
82313417	R O'BRIEN	RENW	352	COM	08 98	.230	85.42	.00	19.65	.00	.00	19.65	5	98219
82676388	J HENKE	RENW	352	COM	02 98	.230	82.11	.00	18.89	.00	.00	18.89	15	98219
82679839	R JONES	RENW	352	COM	02 98	.230	82.11	.00	18.89	.00	.00	18.89	5	98219
82818675	W HOHN	RENW	352	COM	02 98	.230	82.11	.00	18.89	.00	.00	18.89	27	98219
83252684	S JOHNSON	RENW	352	COM	04 98	.230	85.42	.00	19.65	.00	.00	19.65	5	98219
	DANIEL J SIMON						748.92					172.29		TOTAL
COMMISSION TOTALS								HEALTH	LIFE	CHARGE/CR	TOTAL			
FIRST YEAR								.00	351.01	.00	351.01			
RENEWAL								2720.20	.00	.00	2720.20			
OTHER								.00	.00	.00	.00			



*Simon* EXHIBIT *10*  
DATE *9-22-04*  
KIMBERLY K. EVAVOLD  
COURT REPORTER

**BANK STATEMENTS FROM 3/03 TO 8/04**

**WELLS FARGO BANK**

Daniel J. Simon

000234

WELLS FARGO BANK MINNESOTA, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 3

Account Number:  
Statement End Date:  
Number of Enclosures:

5,941  
520-1014471  
03/31/03  
18

**3/03**  
DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

## Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	1,476.51	4,137.60	- 4,223.91	1,390.20

## Views from Wells Fargo

EFFECTIVE FEBRUARY 25, 2003, WHEN CALLING THE NATIONAL BUSINESS BANKING CENTER AT 1-800-225-5935 THE AUTOMATED TELEPHONE MENU OPTIONS WILL CHANGE TO REACH A BUSINESS PHONE BANKER, YOU WILL NEED TO PRESS ZERO (0). TO GO BACK TO A PREVIOUSLY PLAYED MENU YOU WILL NEED TO PRESS THE \* KEY.

Need to finance new or used equipment or vehicles for your business? A Wells Fargo Equipment Express loan offers competitive fixed interest rates and flexible terms, with no application costs and no prepayment penalty. Plus, you can use your loan for multiple purchases. Talk with a banker, call 1-800-359-3557 ext. 430 or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: eqx4 for more information.

## Active Business Checking nib 520-1014471

Feb 28 Beginning Balance  
Mar 31 Ending Balance

1,476.51  
1,390.20

## Deposits and Credits

Date	Transaction Detail	Amount
Mar 03	Bank By Mail Deposit	65.32
Mar 04	Ibillcs.Com 8663724325 000000009610264 Simon Daniel J.	24.95
Mar 04	Overdraft Protection From 30090382130001	322.46
Mar 05	Continental Gen. Mo Comm DD 030103 0098219 Daniel J Simon	2,038.58
Mar 07	Bank By Mail Deposit	146.08
Mar 13	F+g Life Agent Pymt 030311 NAA002078 Simon Daniel	401.05
Mar 13	Deposit	504.24
Mar 18	Bank By Mail Deposit	107.31
Mar 24	F+g Life Agent Pymt 030322 NAA002078 Simon Daniel	402.61
Mar 26	Naa New Batch Dan Simon	125.00

## Withdrawals and Debits

Date	Transaction Detail	Amount
Mar 03	Vallee D'Or Vill Payment 030303 Simon, Daniel Simon, Daniel	- 175.00

Daniel J Simon  
DBA Mid-West Ins BrokersAccount Number:  
Statement End Date:5,942  
520-1014471  
03/31/03

## Withdrawals and Debits

Date	Transaction Detail	Amount
Mar 03	Wells Fargo Bank Loan Pmt 030228 000090382130001 Simon Daniel J	- 89.71
Mar 03	Cal-Surance Asso Cash Trans Shen Daniel Simon	- 41.42
Mar 04	Naa New Batch Dan Simon	- 1,230.00
Mar 05	Client Analysis Srvc Chrg 030304 Svc Chge 0203 000005201014471	- 14.20
Mar 19	Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J	- 395.00
Mar 21	Consumer Loan Payment 030320 000000033060532 Nte*sph*acct 00033060532 Effective 03/2	- 105.70
Mar 24	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 133.88
Mar 26	Check Crd Purchase 03/24 Www.Premiumink.Com Los Angeles Ca 491989XXXXXX6003 24142042M07SBTF3X ?MCC=5943 091000019DA	- 24.90
Mar 31	Prematic Corp Ins. Prem 033103 MLB08J145812 Simon, Daniel J 13	- 117.52

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8063	Mar 03	300.00	8073	Mar 17	62.95
8064	Mar 04	45.96	8074	Mar 17	15.00
8065	Mar 19	238.00	8075	Mar 18	23.24
8066	Mar 11	68.87	8076	Mar 19	69.00
8067	Mar 18	181.52	8077	Mar 11	28.11
8068	Mar 14	55.94	8078	Mar 13	259.77
8069	Mar 14	24.01	8079	Mar 14	10.00
8070	Mar 13	93.00	8080	Mar 17	180.12
8071	Mar 14	41.09	8081	Mar 17	200.00

\* Gap in Check Sequence

## Daily Balance Summary

Date	Balance	Date	Balance
Feb 28	1,476.51	Mar 17	2,044.04
Mar 03	935.70	Mar 18	1,946.59
Mar 04	7.15	Mar 19	1,244.59
Mar 05	2,031.53	Mar 21	1,138.89
Mar 07	2,177.61	Mar 24	1,407.62
Mar 11	2,080.63	Mar 26	1,507.72
Mar 13	2,633.15	Mar 31	1,390.20
Mar 14	2,502.11		

## Activity Charge Summary For This Account

Activity	Volume	Price	Charge
FDIC Assessment Quarterly	1,390.20	.0000	0.04
Account Maintenance W/ Chk Return	1.00	10.0000	10.00
Credits Posted	5.00	.3000	1.50
Deposited Checks - Transit	2.00	.0900	0.18
DDA Checks Paid	18.00	.1500	2.70
ACH Received Item	9.00	.0000	0.00

Total March Activity Charge

14.42-

BALANCE CREDIT: \$.15 OF ACTIVITY CHARGES ARE WAIVED FOR EVERY \$1000 IN  
INVESTABLE BALANCES AVAILABLE FOR SERVICES

+ .25

NET ACTIVITY CHARGE IS DEBITED

= 14.17

\$92,715.17 IN ADDITIONAL BALANCES WOULD HAVE WAIVED THIS ACTIVITY CHARGE

For Your Interest

Continued on next page



WELLS FARGO BANK MINNESOTA, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 3

Account Number:  
Statement End Date:  
Number of Enclosures:

5,711  
520-1014471  
04/30/03  
22

DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

4/03

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	1,390.20	3,836.30	- 4,521.94	704.56

### News from Wells Fargo

Active Business Checking nib 520-1014471

Daniel J Simon  
Dba Mid-West Ins Brokers

Mar 31 Beginning Balance

Apr 30 Ending Balance

1,390.20

704.56

### Deposits and Credits

Date Transaction Detail

Apr 03 Continental Gen. Mo Comm DD 040103 0098219 Daniel J Simon  
Apr 04 Bank By Mail Deposit  
Apr 11 Deposit  
Apr 21 Bank By Mail Deposit  
Apr 24 Deposit  
Apr 25 Deposit

Amount

2,623.53  
95.84  
501.85  
104.42  
309.08  
201.57

### Withdrawals and Debits

Date Transaction Detail

Apr 01 Safe Box Annual Fee MN-MAR10022-2519  
Apr 01 Check Crd Purchase 03/31 Walgreen 00004309 Golden Valley MN  
491989XXXXX6003 24399002S449Mrrlr ?MCC=5912 091000019DA  
Apr 01 Wells Fargo Bank Loan Pmt 030331 000090382130001 Simon Daniel J  
Apr 01 Cal-Surance Asso Cash Trans Shen Daniel Simon  
Apr 03 Vallee D'Or Vill Payment 030403 Simon, Daniel Simon, Daniel  
Apr 07 Client Analysis Svc Chrg 030404 Svc Chge 0303 000005201014471  
Apr 10 Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J  
Apr 14 Naa New Batch D Simon  
Apr 22 Life Investors Premium 34000 3400753828 Rose Ann Jones  
Apr 22 Consumer Loan Payment 030421 000000033060532 Nte\*sph\*acct  
00033060532 Effective 04/2

Amount

- 45.00  
- 133.69  
- 101.48  
- 41.42  
- 175.00  
- 14.17  
- 464.50  
- 240.00  
- 133.88  
- 105.70

Continued on next page

000237

Daniel J Simon  
a Mid-West Ins Brokers

Account Number:  
Statement End Date:

5,712  
520-1014471  
04/30/03

### Withdrawals and Debits

Date	Transaction Detail	Amount
Apr 23	Check Crd Purchase 04/23 Eui*premium Ink 800-707-8664 Ca 491989XXXXXX6003 24755993HEHRES945 ?MCC=5399 091000019DA	- 20.90
Apr 30	Prematic Corp Ins. Prem 043003 MLB08J145812 Simon, Daniel J 13	- 117.52
Apr 30	Check Crd Purchase 04/29 Hab*haband Company Mo 800-213-1220 NJ 491989XXXXXX6003 24692163P007Rfpxy ?MCC=5964 091000019DA	- 41.94

### Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8082	Apr 08	413.50	8093	Apr 09	69.64
8083	Apr 08	57.18	8094	Apr 22	163.72
8084	Apr 11	593.73	8095	Apr 09	200.00
8085	Apr 15	8.88	8096	Apr 10	21.21
8086	Apr 16	10.00	8097	Apr 14	233.27
8087	Apr 09	199.37	8098	Apr 09	100.00
8088	Apr 11	219.00	8101	Apr 11	100.00
8089	Apr 15	55.94	8102	Apr 15	81.58
8090	Apr 09	23.35	8103	Apr 16	110.28
8091	Apr 14	15.00	8104	Apr 24	120.00
8092	Apr 11	41.09	8105	Apr 28	50.00

\* Gap in Check Sequence

### Daily Balance Summary

Date	Balance	Date	Balance
Mar 31	1,390.20	Apr 15	963.42
Apr 01	1,068.61	Apr 16	843.14
Apr 03	3,517.14	Apr 21	947.56
Apr 04	3,612.98	Apr 22	544.26
Apr 07	3,598.81	Apr 23	523.36
Apr 08	3,128.13	Apr 24	712.45
Apr 09	2,535.77	Apr 25	914.02
Apr 10	2,050.06	Apr 28	864.02
Apr 11	1,598.09	Apr 30	704.56
Apr 14	1,109.82		

### Activity Charge Summary For This Account

Activity	Volume	Price	Charge
Account Maintenance W/ Chk Return	1.00	10.0000	10.00
Credits Posted	5.00	.3000	1.50
Deposited Checks-On-Us	1.00	.0800	0.08
Deposited Checks - Transit	2.00	.0900	0.18
DDA Checks Paid	22.00	.1500	3.30
ACH Received Item	5.00	.0000	0.00

Total April Activity Charge 15.06

BALANCE CREDIT: \$15 OF ACTIVITY CHARGES ARE WAIVED FOR EVERY \$1000 IN  
INVESTABLE BALANCES AVAILABLE FOR SERVICES

NET ACTIVITY CHARGE IS DEBITED

\$100,311.22 IN ADDITIONAL BALANCES WOULD HAVE WAIVED THIS ACTIVITY CHARGE

+ .22  
= 14.84

### Your Interest

There's no time like the present to get the right credit for your business needs. At Wells Fargo, you'll find a variety of financing options -- loans, lines of credit or credit cards -- to help your business grow today and into the future. Call 1-800-359-3557 ext. 605, or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: BDLL for more information. Equal Housing Lender.



WELLS FARGO BANK MINNESOTA, N.A.  
 NEW HOPE OFFICE  
 POST OFFICE BOX B 514  
 MINNEAPOLIS, MN 55479

Page 1 of 4

Account Number:  
 Statement End Date:  
 Number of Enclosures:

5,667  
 520-1014471  
 05/31/03  
 30

|||||  
 DANIEL J SIMON  
 DBA MID-WEST INS BROKERS  
 7527 HAROLD AVE  
 GOLDEN VALLEY MN 55427-4858

5/03

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

#### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	704.56	4,439.70	- 4,540.20	604.06

#### News from Wells Fargo

It's no time like the present to get the right credit for your business needs. At Wells Fargo, you'll find a variety of financing options—loans, lines of credit or credit cards—to help your business grow today and into the future. Call 1-800-359-3557 ext.415, or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: BDLL2 for more information. Equal Housing Lender.

Still writing checks? Bill Pay for your business is a fast, easy, and secure way to pay all your business and personal bills. And it's available 24/7. Enroll now and your first two months are free. Go to [wellsfargo.com/biz/nochecks](http://wellsfargo.com/biz/nochecks) or call 1-800-956-4442.

#### Active Business Checking nib 520-1014471

Daniel J Simon  
 DBA Mid-West Ins Brokers

Apr 30	Beginning Balance	704.56
May 31	Ending Balance	604.06

#### Deposits and Credits

Date	Transaction Detail	Amount
May 05	Continental Gen. Mo Comm DD-050103 0098219 Daniel J Simon	1,236.59
May 07	Deposit	3,000.00
May 27	Deposit	203.11

#### Withdrawals and Debits

Date	Transaction Detail	Amount
May 01	Wells Fargo Bank Loan Pmt 030430 000090382130001 Simon Daniel J	- 99.54
May 01	Cal-Surance Asso Cash Trans Shen Daniel Simon	- 41.42
May 05	Client Analysis Srvc Chrg 030502 Svc Chge 0403 000005201014471	- 14.84
May 05	Vallee D'Or Vill Payment 030505 Simon, Daniel Simon, Daniel	- 175.00
May 05	Superior Perform We 4/22/03 Dan Simon	120.00
May 06	Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J	464.50

000239

Continued on next page

Daniel J Simon  
The Mid-West Ins BrokersAccount Number:  
Statement End Date:

## Withdrawals and Debits

Date	Transaction Detail	Amount
May 12	Naa Batch #3 Dan Simon	- 65.00
May 12	Check Crd Purchase 05/08 Chef Wizard 802-8463710 Ma 491989XXXXXX6003 244036941LN9A957N ?MCC=5969 091000019DA	- 21.90
May 12	Check Crd Purchase 05/08 Chef Wizard 802-8463710 Ma 491989XXXXXX6003 244036941LN9A957Y ?MCC=5969 091000019DA	- 6.95
May 14	Check Crd Purchase 05/12 Bachmans Plymouth 006 Plymouth MN 491989XXXXXX6003 2432684451N0H45FI ?MCC=5261 091000019DA	- 101.12
May 19	Check Crd Purchase 05/16 Inf*infousa 402-537-7933 Ne 491989XXXXXX6003 246921648007BLNT3 ?MCC=5969 091000019DA	- 395.31
May 19	Check Crd Purchase 05/16 Rainbow Foods #51 Plymouth MN 491989XXXXXX6003 2445501483ZY920J9 ?MCC=5411 091000019DA	- 23.23
May 19	Check Crd Purchase 05/16 Bachmans Plymouth 006 Plymouth MN 491989XXXXXX6003 2432684491N0H4B9Y ?MCC=5261 091000019DA	- 19.06
May 19	Check Crd Purchase 05/15 Sears Roebuck 1112 Minnetonka MN 491989XXXXXX6003 24610434803PL4GW5 ?MCC=5311 091000019DA	- 14.99
May 19	Check Crd Purchase 05/16 The Home Depot 2806 St.Louis Park MN 491989XXXXXX6003 24610434909FBP9M4 ?MCC=5200 091000019DA	- 13.75
May 19	Check Crd Purchase 05/17 The Home Depot 2806 St.Louis Park MN 491989XXXXXX6003 24610434A09FEPBA1 ?MCC=5200 091000019DA	- 10.61
May 19	Check Crd Purchase 05/17 The Liquor Barrel Golden Valley MN 491989XXXXXX6003 24607944A60Z53Ssr ?MCC=5921 091000019DA	- 4.34
May 21	Consumer Loan Payment 030520 000000033060532 Nte*sph*acct 00033060532 Effective 05/2	- 105.70
May 22	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 133.88

## Checks Paid

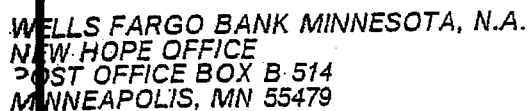
Check #	Date	Amount	Check #	Date	Amount
8099	May 27	15.00	8120	May 12	9.15
8106	May 08	44.90	8121	May 09	910.33
8107	May 06	77.08	8122	May 15	53.24
8108	May 05	21.19	8123	May 15	24.00
8109	May 08	25.00	8124	May 15	25.00
8110	May 07	11.56	8125	May 13	419.21
8111	May 07	9.29	8126	May 13	27.64
8112	May 09	233.22	8127	May 13	21.29
8113	May 12	89.27	8128	May 14	32.09
8114	May 13	38.36	8129	May 15	93.25
8115	May 08	34.01	8130	May 21	20.00
8116	May 12	23.34	8131	May 22	25.00
8117	May 07	57.44	8132	May 19	100.00
8118	May 07	12.87	8133	May 19	100.00
8119	May 12	56.33	8135	May 29	100.00

\* Gap in Check Sequence

## Daily Balance Summary

Date	Balance	Date	Balance
Apr 30	704.56	May 13	1,810.52
May 01	563.60	May 14	1,677.31
May 05	1,469.16	May 15	1,481.82
May 06	927.58	May 19	800.53
May 07	3,836.42	May 21	674.83
May 08	3,732.51	May 22	515.95
May 09	2,588.96	May 27	704.06
May 12	2,317.02	May 29	604.06

000240



Account Number:  
Statement End Date:  
Number of Enclosures:

5,484  
520-1014471  
06/30/03  
20

DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

6/03

***If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).***

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	604.06	10,266.33	- 10,310.12	560.27

**Save on your business banking - and save hundreds of dollars. You can do both with Wells Fargo Business Services PackageSM. Customize a Package that is right for your business, including checking, savings, payroll, credit, merchant card processing or other services. Whatever financial services your business might need, Wells Fargo has a Business Services Package for you. Stop by a Wells Fargo location or call 1-800-359-3557, extension 416 for more information.**

**Take advantage of our special Payroll offer. Sign up for Online Payroll by Wells Fargo<sup>SM</sup> between 6/1/03 and 7/15/03 for free installation (value up to \$100). First payroll must be processed by 8/31/03. Online Payroll by Wells Fargo allows you to calculate payroll instantly, view reports online and offer direct deposit or print paper checks at your business. It also offers next day paychecks and basic business checking free of monthly maintenance fees when that account is used to fund payroll. Call 1-800-359-3557 extension 417 or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword Payroll3 for more information.**

**Active Business Checking nib 520-1014471**

**Daniel J. Simon**  
**Liba Mid-West Ins Brokers**

May 31 Beginning Balance

604.06

Jun 30 Ending Balance

560.27

## Deposits and Credits

Date	Transaction Detail	Amount
Jun 02	Deposit	1,000.00
Jun 04	Mbna America Direct Dep 030603 401267400040266	7,350.00
Jun 04	Continental Gen. Mo Comm DD 053103 0098219 Daniel J Simon	1,536.02
Jun 16	Check Crd Pur Rtrn 06/13 Infinfousa 402-537-7933 Ne 491989XXXXX6003 74692165400NSF6WO ?MCC=5969 091000019DA	380.31

000241



Daniel J Simon  
Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
06/30/03

## Withdrawals and Debits

Date	Transaction Detail	Amount
Jun 02	Naa Naa Dan Simon	- 130.00
Jun 02	Prematic Corp Ins. Prem 060203 MLB08J145812 Simon, Daniel J 13	- 117.52
Jun 02	Cal-Surance Asso Cash Trans Shen Daniel Simon	- 41.42
Jun 02	Check Crd Purchase 05/31 Rainbow Foods #51 Plymouth MN 491989XXXXXX6003 24455014P4Dxaeyew ?MCC=5411 091000019DA	- 26.27
Jun 03	Vallee D'Or Vill Payment 030603 Simon, Daniel Simon, Daniel	- 175.00
Jun 03	Check Crd Purchase 06/02 Gordon Engstrand DDS Minnetonka MN 491989XXXXXX6003 24493984T60BAXKJ4 ?MCC=8021 091000019DA	- 93.38
Jun 05	Client Analysis Svc Chrg 030604 Svc Chge 0503 000005201014471	- 14.90
Jun 05	Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J	- 464.50
Jun 09	Check Crd Purchase 06/07 Cub Foods, Inc. Crystal MN 491989XXXXXX6003 24455014Y4LDVLE02 ?MCC=5411 091000019DA	- 76.88
Jun 09	Check Crd Purchase 06/07 Walgreen 00004309 Golden Valley MN 491989XXXXXX6003 24399004Z44822381 ?MCC=5912 091000019DA	- 27.16
Jun 09	Check Crd Purchase 06/06 Merwin Valley Drug #7 Golden Valle MN 491989XXXXXX6003 24071054ZWPQNM1He ?MCC=5912 091000019DA	- 14.14
Jun 17	Check Crd Purchase 06/16 Mgm Liquor Golden Valley MN 491989XXXXXX6003 247170558JMKK488Z ?MCC=5921 091000019DA	- 23.97
Jun 23	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 133.88
Jun 23	Consumer Loan Payment 030620 000000033060532 Nte*sph*acct 00033060532 Effective 06/2	- 105.70
Jun 23	Check Crd Purchase 06/19 Fiber Thin 775-4124843 Ca 491989XXXXXX6003 24142045Q0FXM2N9S ?MCC=5969 091000019DA	- 39.88
Jun 24	Check Crd Purchase 06/23 Puritan'S Pride Vitami 800-645-9584 Ny 491989XXXXXX6003 24610435E03P6Y2Dq ?MCC=5969 091000019DA	- 19.85
Jun 30	Prematic Corp Ins. Prem 063003 MLB08J145812 Simon, Daniel J 13	- 117.52
Jun 30	Check Crd Purchase 06/29 Down In The Valley Inc Golden Valley MN 491989XXXXXX6003 24792625L8B4SW1Ts ?MCC=5735 091000019DA	- 21.02

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8134	Jun 02	25.00	8145	Jun 13	110.55
8136	Jun 03	14.77	8146	Jun 10	152.06
8137	Jun 09	447.00	8147	Jun 09	44.00
8138	Jun 09	15.00	8149	Jun 12	50.00
8139	Jun 10	83.05	8150	Jun 17	7,000.00
8140	Jun 10	40.87	8151	Jun 23	25.00
8141	Jun 06	23.34	8152	Jun 18	100.00
8142	Jun 09	70.30	8153	Jun 17	100.00
8143	Jun 05	200.00	8154	Jun 27	25.00
8144	Jun 05	41.19	8155	Jun 23	100.00

\* Gap in Check Sequence

## Daily Balance Summary

Date	Balance	Date	Balance
May 31	604.06	Jun 13	7,991.78
Jun 02	1,263.85	Jun 16	8,372.09
Jun 03	980.70	Jun 17	1,248.12
Jun 04	9,866.72	Jun 18	1,148.12
Jun 05	9,146.13	Jun 23	743.66
Jun 06	9,122.79	Jun 24	723.81
Jun 09	8,428.31	Jun 27	698.81
Jun 10	8,152.33	Jun 30	560.27
Jun 12	8,102.33		

000242

WELLS FARGO BANK MINNESOTA, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 4

Account Number:  
Statement End Date:  
Number of Enclosures:

5,346  
520-1014471  
07/31/03  
22



DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

7/03

If you have any questions about this statement or your accounts, call 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/Credits	Withdrawals/Debits	Ending Balance
Active Business Checking nib 520-1014471	560.27	32,568.46	-3,309.60	29,819.13

### News from Wells Fargo

Increase your sales by providing your customers with more payment options. Wells Fargo Merchant Services can help your business with our credit, debit, and ATM/online payment choices. And, when you have a Wells Fargo Business Checking account, funds may be posted to your account the next business day. Call us at 1-800-359-3557, ext. 422 or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: merchant3 to find out about ways to provide more payment options.

Being self-employed is rewarding. Reward yourself by refinancing with Wells Fargo Home Mortgage. With Wells Fargo Home Mortgage's flexible guidelines, you can refinance without worrying about verifying every dollar that you earn. Call Wells Fargo Home Mortgage at 1-877-291-4326 and mention code 77g2.

### Active Business Checking nib 520-1014471

Daniel J Simon  
Dba Mid-West Ins Brokers

Jul 30	Beginning Balance	560.27
Jul 31	Ending Balance	29,819.13

### Deposits and Credits

Date	Transaction Detail	Amount
Jul 03	Continental Gen. Mo Comm DD 070103 0098219 Daniel J Simon	1,630.66
Jul 03	F+g Life Agent Pymt 030702 NAA002078 Simon Daniel	258.85
Jul 03	Deposit	32.80
Jul 09	F+g Life Agent Pymt 030708 NAA002078 Simon Daniel	210.27
Jul 16	Deposit	309.09
Jul 28	Deposit	404.11
Jul 31	Deposit	29,722.68

000243

Daniel J Simon  
Mid-West Ins BrokersAccount Number: 520-1014471  
Statement End Date: 07/31/03

## Withdrawals and Debits

Date	Transaction Detail	Amount
Jul 01	Cal-Surance Asso Cash Trans Shen Daniel Simon	- 41.42
Jul 03	Vallee D'Or Vill Payment 030703 Simon Daniel Simon Daniel	- 175.00
Jul 03	Check Crd Purchase 07/01 Golden Valley Tire & S Golden Valley MN 491989XXXXXX6003 24323015P3B G8Pbde ?MCC=5533 091000019DA	- 25.56
Jul 07	Client Analysis Svc Chrg 030703 Svc Chge 0603 000005201014471	- 12.70
Jul 07	Blue Cross Bs MN Blue X Pay 476467947000 Simon Daniel J	- 464.50
Jul 07	Check Crd Purchase 07/03 Hab haband Company Mo 800-213-1220 NJ 491989XXXXXX6003 24692165R00SR6V1T ?MCC=5964 091000019DA	- 58.93
Jul 08	Check Crd Purchase 07/05 lbillcs.Com *net Manag 800-307-3558 FI 491989XXXXXX6003 24401405W1T3K96DA ?MCC=5967 091000019DA	- 1.00
Jul 09	Check Crd Purchase 07/08 Hab haband Company Mo 800-213-1220 NJ 491989XXXXXX6003 24692165X004A0E1V ?MCC=5964 091000019DA	- 41.94
Jul 14	Check Crd Purchase 07/12 lpay-Friendfinder 650-8473100 Kn 491989XXXXXX6003 7474147630HZ95Z4Z ?MCC=5967 091000019DA	- 19.96
Jul 15	Check Crd Purchase 07/14 Walgreen 00004309 Golden Valley MN 491989XXXXXX6003 243990063449MYZS7 ?MCC=5912 091000019DA	- 13.82
Jul 16	Check Crd Purchase 07/14 Cub Foods, Inc. Crystal MN 491989XXXXXX6003 2445501635Nwhlapy ?MCC=5411 091000019DA	- 54.04
Jul 21	Check Crd Purchase 07/19 Rainbow Foods 1-885-Plymoth MN 491989XXXXXX6003 2445501685VHKR99L ?MCC=5411 091000019DA	- 14.65
Jul 22	Life Investors Premium 34000.3400753828 Rose Ann Jones	- 133.88
Jul 22	Consumer Loan Payment 030721 000000033060532 Nte*sph*acct 00033060532 Effective 07/2	- 105.70
Jul 22	Check Crd Purchase 07/20 Living Words Bookstore Brooklyn Park MN 491989XXXXXX6003 24493986A9NA66Q6G ?MCC=5942 091000019DA	- 31.90
Jul 23	Check Crd Purchase 07/21 Fiber Thin 775-4124843 Ca 491989XXXXXX6003 24142046Q0JXOSP71 ?MCC=5969 091000019DA	- 29.93
Jul 28	Naa Naa Dan Simon	- 195.00
Jul 28	Check Crd Purchase 07/25 Live Link 866-331-4500 605-338-3848 PA 491989XXXXXX6003 24194046GWGNDYXJ1 ?MCC=5967 091000019DA	- 69.00
Jul 28	Check Crd Purchase 07/25 Mgm Liquor Golden Valley MN 491989XXXXXX6003 24717056FJM27AH0B ?MCC=5921 091000019DA	- 20.18
Jul 29	Check Crd Purchase 07/27 Badata.Net 866-812-8737 NJ 491989XXXXXX6003 24601906H62Z7L8Yx ?MCC=5967 091000019DA	- 1.00
Jul 31	Prematic Corp Ins. Prem 073103 MLB08J145812 Simon Daniel J 13	- 117.52

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8156	Jul 01	82.86	8167	Jul 08	24.70
8157	Jul 03	25.00	8168	Jul 08	100.00
8158	Jul 03	200.00	8169	Jul 08	169.77
8159	Jul 11	133.20	8170	Jul 09	63.00
8160	Jul 08	21.95	8171	Jul 09	74.00
8161	Jul 09	69.64	8172	Jul 14	75.97
8162	Jul 09	62.23	8173	Jul 18	25.00
8163	Jul 10	23.34	8174	Jul 21	133.38
8164	Jul 14	57.72	8175	Jul 28	160.65
8165	Jul 11	44.82	8176	Jul 24	25.00
8166	Jul 11	40.87	8177	Jul 30	68.87

## Daily Balance Summary

Date	Balance	Date	Balance
Jun 30	560.27	Jul 15	568.95
Jul 01	435.99	Jul 16	824.00
Jul 03	1,932.74	Jul 18	799.00
Jul 07	1,396.61	Jul 21	650.97
Jul 08	1,079.19	Jul 22	379.49
Jul 09	978.65	Jul 23	188.91
Jul 10	955.31	Jul 24	163.91
Jul 11	736.42	Jul 28	283.84
Jul 14	582.77	Jul 29	282.84

000244

WELLS FARGO BANK MINNESOTA, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Account Number:  
Statement End Date:  
Number of Enclosures:

5,030  
520-1014471  
08/31/03  
17

DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

8/03

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	29,819.13	2,906.78	- 23,099.08	9,626.83

### News from Wells Fargo

Receive daily account updates and alerts via fax or email with our Morning Express(R) service - an easy-to-read report on your previous day's business checking account activity - as early as 7am every business day. Talk to a banker or call 1-800-359-3557 ext. 464 for more information.

### Active Business Checking nib 520-1014471

Daniel J Simon  
Dba Mid-West Ins Brokers

Jul 31	Beginning Balance	29,819.13
Aug 31	Ending Balance	9,626.83

### Deposits and Credits

Date	Transaction Detail	Amount
Aug 05	Continental Gen. Mo Comm DD 080103 0098219 Daniel J Simon	1,855.57
Aug 11	F+g Life Agent Pymt 030808 NAA002078 Simon Daniel	120.34
Aug 20	Continental Gen. Adv. Com DD 081503 0098219 Daniel J Simon	94.81
Aug 22	Continental Gen. Adv. Com DD 081903 0098219 Daniel J Simon	34.35
Aug 22	F+g Life Agent Pymt 030821 NAA002078 Simon Daniel	349.70
Aug 25	F+g Life Agent Pymt 030822 NAA002078 Simon Daniel	109.82
Aug 26	Continental Gen. Adv. Com DD 082103 0098219 Daniel J Simon	88.85
Aug 27	Deposit	253.34

### Withdrawals and Debits

Date	Transaction Detail	Amount
Aug 04	Dr-Right Of Setoff To Acct 1021-227495	1 - 35.71
Aug 04	Vallee D'Or Vill Payment 030804 Simon, Daniel Simon, Daniel	2 - 175.00
Aug 04	Naa Naa Dan Simon	3 - 143.00
Aug 04	Check Crd Purchase 08/01 Cub Foods, Inc. Crystal MN 491989XXXXXX6003 24455016M67M1QP2S ?MCC = 5411 091000019DA	4 - 44.84

000245

Daniel J Simon  
Mid-West Ins BrokersAccount Number:  
Statement End Date:5.031  
520-1014471  
08/31/03

## Withdrawals and Debits

Date	Transaction Detail	Amount
Aug 04	Check Crd Purchase 08/01 Turning Point Santee Ca 491989XXXXXX6003 24323006N7QR4DH85 ?MCC=5942 091000019DA	5-35.00
Aug 04	Check Crd Purchase 08/01 Life In The Word Inc. 636-349-0303 Mo 491989XXXXXX6003 24412956M09A0TS5Q ?MCC=5969 091000019DA	6-25.00
Aug 04	Check Crd Purchase 08/01 The Liquor Barrel Golden Valley MN 491989XXXXXX6003 24607946M8AHHQG4L ?MCC=5921 091000019DA	7-19.37
Aug 05	Client Analysis Srvc Chrg 030804 Svc Chge 0703 000005201014471	8-14.51
Aug 05	Brown And Brown Payment 030804 Daniel J Simon	9-41.42
Aug 05	Check Crd Purchase 08/03 Cub Foods #3124 Minneapolis MN 491989XXXXXX6003 24455016P69GMW9Qy ?MCC=5411 091000019DA	10-26.30
Aug 06	Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J	11-464.50
Aug 06	Check Crd Purchase 08/06 Eui*premium Ink 800-230-7690 Ca 491989XXXXXX6003 24755996SEHREGN05 ?MCC=5399 091000019DA	12-55.85
Aug 06	Check Crd Purchase 08/04 Make A Fortune On Ebay Los Gatos Ca 491989XXXXXX6003 24142046S0L6R6S81 ?MCC=7399 091000019DA	13-22.90
Aug 06	Check Crd Purchase 08/04 Office Max 00006577 Saint Louis P. MN 491989XXXXXX6003 2439900675F4TDY0F ?MCC=5943 091000019DA	14-17.85
Aug 11	Naa Naa Dan Simon	15-203.00
Aug 12	Check Crd Purchase 08/11 The Liquor Barrel Golden Valley MN 491989XXXXXX6003 24607946Z8AHHgggy ?MCC=5921 091000019DA	16-20.75
Aug 14	Check Crd Purchase 08/12 Cub Foods, Inc. Brooklyn Par MN 491989XXXXXX6003 2445501706HWSLH8T ?MCC=5411 091000019DA	17-23.52
Aug 15	Check Crd Purchase 08/14 Jmministries Org 314-349-0303 Mo 491989XXXXXX6003 24412957200853Tzy ?MCC=5969 091000019DA	18-25.00
Aug 15	Check Crd Purchase 08/14 Jmministries Org 314-349-0303 Mo 491989XXXXXX6003 24412957200853S2A ?MCC=5969 091000019DA	19-15.00
Aug 18	Naa Naa Dan Simon	20-203.00
Aug 18	Check Crd Purchase 08/16 Walgreen 00004309 Golden Valley MN 491989XXXXXX6003 2439900754480MTS8 ?MCC=5912 091000019DA	21-24.06
Aug 18	Check Crd Purchase 08/14 Lakewood Church 01 Of 713 4911123 Tx 491989XXXXXX6003 247642073S662ZBP5 ?MCC=8398 091000019DA	22-20.00
Aug 20	Check Crd Purchase 08/18 Eui*softwaresavings Pl 800-5593096 Ca 491989XXXXXX6003 247182077DRTA2R6N ?MCC=5734 091000019DA	23-19.95
Aug 21	Consumer Loan Payment 030820 000000033060532 Nte*sph*acct 00033060532 Effective 08/2	24-105.70
Aug 21	Check Crd Purchase 08/19 Hp Parts Support 8002278164 Ca 491989XXXXXX6003 240017578985J15T1 ?MCC=7379 091000019DA	25-47.06
Aug 21	Check Crd Purchase 08/20 The Liquor Barrel Golden Valley MN 491989XXXXXX6003 24607947960Z53Syp ?MCC=5921 091000019DA	26-10.89
Aug 22	Life Investors Premium 34000 3400753828 Rose Ann Jones	27-133.88
Aug 25	Naa Naa Dan Simon	28-225.00
Aug 25	Check Crd Purchase 08/22 Cl *juno Tech Support 888-839-5866 Ny 491989XXXXXX6003 24692167A00LH8R0D ?MCC=4816 091000019DA	29-62.40
Aug 25	Check Crd Purchase 08/22 Hp Parts Support 8002278164 Ca 491989XXXXXX6003 24001757B985M3S4D ?MCC=7379 091000019DA	30-30.00
Aug 25	Check Crd Purchase 08/22 Cl *juno Tech Support 888-839-5866 Ny 491989XXXXXX6003 24692167A00L1Przr ?MCC=4816 091000019DA	31-25.35
Aug 25	Check Crd Purchase 08/23 Mgm Liquor Golden Valley MN 491989XXXXXX6003 24717057QJN7YqbdT ?MCC=5921 091000019DA	32-19.61
Aug 25	Check Crd Purchase 08/24 Drug Emporium #7652 Richfield MN 491989XXXXXX6003 24445007DK0Fndtbg ?MCC=5912 091000019DA	33-13.77
Aug 25	Check Crd Purchase 08/22 Walgreen 00004309 Golden Valley MN 491989XXXXXX6003 24399007B44A5SdJg ?MCC=5912 091000019DA	34-9.29
Aug 26	Check Crd Purchase 08/24 Hp Parts Support 8002278164 Ca 491989XXXXXX6003 24001757D985NKE91 ?MCC=7379 091000019DA	35-25.00
Aug 27	Check Crd Purchase 08/25 Rdhinternet.Net 18888306339 Df 491989XXXXXX6003 24601907E6Y2LP18A ?MCC=5967 091000019DA	36-4.95
Aug 29	Check Crd Purchase 08/28 Hab*haband Company Mo 800-213-1220 NJ 491989XXXXXX6003 24692167G000EPDA9 ?MCC=5964 091000019DA	37-71.55

000246

Daniel J. Simon  
Mid-West Ins Brokers

Account Number:  
Statement End Date:

5.032  
520-1014471  
08/31/03

**Checks Paid**

Check #	Date	Amount	Check #	Date	Amount
8178	Aug 01	15.88	8188	Aug 06	133.74
8179	Aug 04	8.73	8189	Aug 07	24.00
8181	Aug 04	19,423.62	8190	Aug 11	100.00
8182	Aug 07	25.00	8191	Aug 11	100.00
8183	Aug 13	99.43	8192	Aug 14	93.37
8184	Aug 08	23.38	8193	Aug 15	40.98
8185	Aug 11	56.33	8194	Aug 19	24.90
8186	Aug 11	70.34	8195	Aug 26	200.00
8187	Aug 06	199.40			

\* Gap in Check Sequence

**Daily Balance Summary**

Date	Balance	Date	Balance
Jul 31	29,819.13	Aug 15	9,972.32
Aug 01	29,803.25	Aug 18	9,725.26
Aug 04	9,892.98	Aug 19	9,700.36
Aug 05	11,666.32	Aug 20	9,775.22
Aug 06	10,772.08	Aug 21	9,611.57
Aug 07	10,723.08	Aug 22	9,861.74
Aug 08	10,699.70	Aug 25	9,586.14
Aug 11	10,290.37	Aug 26	9,449.99
Aug 12	10,269.62	Aug 27	9,698.38
Aug 13	10,170.19	Aug 29	9,626.83
Aug 14	10,053.30		

**Activity Charge Summary For This Account**

Activity	Volume	Price	Charge
Account Maintenance W/ Chk Return	1.00	10.0000	10.00
Credits Posted	1.00	.3000	0.30
Deposited Checks - Transit	1.00	.0900	0.09
DDA Checks Paid	17.00	.1500	2.55
ACH Received Item	15.00	.0000	0.00
Total August Activity Charge			12.94
BALANCE CREDIT: \$.15 OF ACTIVITY CHARGES ARE WAIVED FOR EVERY \$1000 IN INVESTABLE BALANCES AVAILABLE FOR SERVICES			+ 1.39
NET ACTIVITY CHARGE IS DEBITED			= 11.55
\$75,551.26 IN ADDITIONAL BALANCES WOULD HAVE WAIVED THIS ACTIVITY CHARGE			

For Your Interest

97

72

20

000247



WELLS FARGO BANK MINNESOTA, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 4

Account Number:  
Statement End Date:  
Number of Enclosures:

5,362  
520-1014471  
09/30/03  
18

DANIEL J SIMON  
DBA MID-WEST INS. BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

9/03

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

## Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	9,626.83	5,419.64	- 10,159.93	4,886.54

## News from Wells Fargo

- The Wells Fargo Visa Business Card is a convenient source of credit that gives your business the control and flexibility you need. Your Wells Fargo(R) Business Card gives you:
- Access credit when you need it
  - Get cash from over 800,000 ATMs worldwide
  - Control how much credit is authorized for each employee
  - Track expenses with quarterly management reports
  - Benefit from the optional BusinessMiles program and you will earn valuable points toward air travel, merchandise and gift certificates.

Call 1-800-359-3557 extension 427 or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: Bcard for more information on how a Wells Fargo Visa Business Card can help your business.

## Active Business Checking nib 520-1014471

Daniel J Simon  
DBA Mid-West Ins Brokers

Aug 31 Beginning Balance	9,626.83
Sep 30 Ending Balance	4,886.54

## Deposits and Credits

Date	Transaction Detail	Amount
Sep 02	F+g Life Agent Pymt 030829 NAA002078 Simon Daniel	854.67
Sep 04	Continental Gen. Mo Comm DD 083003 0098219 Daniel J Simon	2,267.40
Sep 04	F+g Life Agent Pymt 030903 NAA002078 Simon Daniel	440.19
Sep 05	F+g Life Agent Pymt 030904 NAA002078 Simon Daniel	377.78
Sep 12	F+g Life Agent Pymt 030910 NAA002078 Simon Daniel	612.94
Sep 15	F+g Life Agent Pymt 030913 NAA002078 Simon Daniel	324.71
Sep 16	Continental Gen. Adv Com DD 091103 0098219 Daniel J Simon	97.41
Sep 22	F+g Life Agent Pymt 030920 NAA002078 Simon Daniel	360.72

Daniel J Simon  
Mid-West Ins BrokersAccount Number:  
Statement End Date:5,363  
520-1014471  
09/30/03

## Deposits and Credits

Date	Transaction Detail	Amount
Sep 22	Check Crd Pur Rtrn 09/18 Ruby S. 888-3307338 Gb 491989XXXXX6003 7460190867LFQ0Fgv ?MCC=5964 091000019DA	19.95
Sep 26	Check Crd Pur Rtrn 09/24 Epowerandprofits.Com 800-2462699 Ca 491989XXXXX6003 74142048B0BTK6Rzf ?MCC=5969 091000019DA	49.90
Sep 29	Deposit	13.97

## Withdrawals and Debits

Date	Transaction Detail	Amount
Sep 02	Naa Naa Dan Simon	- 225.00
Sep 02	Prematic Corp Ins. Prem 090203 MLB08J145812 Simon, Daniel J 13	- 119.46
Sep 02	Check Crd Purchase 09/01 Jmministries.Org 314-349-0303 Mo 491989XXXXX6003 24412957L0084Ebks ?MCC=5969 091000019DA	- 53.00
Sep 02	Check Crd Purchase 08/29 Jmministries.Org 314-349-0303 Mo 491989XXXXX6003 24412957H0084EBD7 ?MCC=5969 091000019DA	- 35.00
Sep 02	Check Crd Purchase 08/29 Compusa #787 Minnetonka MN 491989XXXXX6003 24415007KK31Fhxhz ?MCC=5734 091000019DA	- 21.29
Sep 03	Vallee D'Or Vill Payment 030903 Simon, Daniel Simon, Daniel	- 175.00
Sep 04	Check Crd Purchase 09/02 Office Max 00006577 Saint Louis P MN 491989XXXXX6003 24399007N5F4TDYZ0 ?MCC=5943 091000019DA	- 23.83
Sep 05	Client Analysis Srvc Chrg 030904 Svc Chge 0803 000005201014471	- 11.55
Sep 05	Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J	- 464.50
Sep 05	Check Crd Purchase 09/03 Make A Fortune On Ebay 800-2462699 Ca 491989XXXXX6003 24142047N0Bkawqaw ?MCC=7399 091000019DA	- 49.95
Sep 08	Naa Naa Dan Simon	- 225.00
Sep 08	Check Crd Purchase 09/05 Rainbow Foods 1-885 Plymouth MN 491989XXXXX6003 24455017R788448Yw ?MCC=5411 091000019DA	- 24.74
Sep 10	Check Crd Purchase 09/10 Nutritional Health Ser 800-224-8912 Sc 491989XXXXX6003 24431867Xwgtazday ?MCC=5499 091000019DA	- 86.85
Sep 12	Check Crd Purchase 09/11 Walgreen 00004309 Golden Valley MN 491989XXXXX6003 24399007Y4497X3V7 ?MCC=5912 091000019DA	- 26.51
Sep 15	Naa Naa Dan Simon	- 225.00
Sep 15	Check Crd Purchase 09/12 Jmministries.Org 314-349-0303 Mo 491989XXXXX6003 24412957Z0084ED0V ?MCC=5969 091000019DA	- 30.00
Sep 15	Check Crd Purchase 09/12 The Liquor Barrel Golden Valley MN 491989XXXXX6003 24337897Z5Sengtby ?MCC=5921 091000019DA	- 20.70
Sep 16	Check Crd Purchase 09/18 Ruby S. 888-3307338 Gb 491989XXXXX6003 2460190827FTTNL4G ?MCC=5964 091000019DA	- 19.95
Sep 17	Discover Smart Chk 601100722027342 Simon Daniel	- 334.62
Sep 17	Check Crd Purchase 09/15 Golden Valley Tire & S Golden Valley MN 491989XXXXX6003 2432301833BG90GD7 ?MCC=5533 091000019DA	- 306.67
Sep 17	Brown And Brown Payment 030916 Daniel J Simon	- 41.42
Sep 19	Check Crd Purchase 09/17 Warners Stellian/Minne 6128256465 MN 491989XXXXX6003 2432302853GZ5F5Rf ?MCC=5722 091000019DA	- 670.71
Sep 22	Naa Naa Dan Simon	- 225.00
Sep 22	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Sep 22	Check Crd Purchase 09/19 Walgreen 00004309 Golden Valley MN 491989XXXXX6003 24399008744A5BTY6 ?MCC=5912 091000019DA	- 45.36
Sep 23	Consumer Loan Payment 030922 000000033060532 Nte*sph*acct 00033060532 Effective 09/2	- 105.70
Sep 23	Check Crd Purchase 09/22 Jmministries.Org 314-349-0303 Mo 491989XXXXX6003 24412958900853P6H ?MCC=5969 091000019DA	- 50.00
Sep 25	Check Crd Purchase 09/24 Target 00001008 Minnetonka MN 491989XXXXX6003 24164078B2LR9KJ89 ?MCC=5310 091000019DA	- 28.74
Sep 25	Check Crd Purchase 09/24 Walgreen 00004309 Golden Valley MN 491989XXXXX6003 24399008B448Ddxn ?MCC=5912 091000019DA	- 22.67
Sep 25	Check Crd Purchase 09/24 Upc vistaprint.Com 781-890-8434 Ma 491989XXXXX6003 24692168B00FZY7J1 ?MCC=2741 091000019DA	- 5.25
Sep 29	Naa Naa Dan Simon	- 225.00
Sep 30	Prematic Corp Ins. Prem 093003 MLB08J145812 Simon, Daniel J 13	- 120.90



Daniel J Simon  
Dba Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
09/30/03

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8196	Sep 05	25.00	8205	Sep 08	107.50
8197	Sep 05	200.00	8206	Sep 10	25.59
8198	Sep 09	41.06	8207	Sep 10	19.25
8199	Sep 08	50.40	8208	Sep 09	200.00
8200	Sep 10	57.83	8209	Sep 15	257.00
8201	Sep 08	81.55	8210	Sep 18	4,100.00
8202	Sep 10	139.45	8211	Sep 23	200.00
8203	Sep 08	17.35	8214	Sep 29	200.00
8204	Sep 08	24.46	8215	Sep 29	200.00

\* Gap in Check Sequence

## Daily Balance Summary

Date	Balance	Date	Balance
Aug 31	9,626.83	Sep 16	11,518.16
Sep 02	10,027.75	Sep 17	10,835.45
Sep 03	9,852.75	Sep 18	6,735.45
Sep 04	12,536.51	Sep 19	6,064.74
Sep 05	12,163.29	Sep 22	5,980.93
Sep 08	11,632.29	Sep 23	5,625.23
Sep 09	11,391.23	Sep 25	5,568.57
Sep 10	11,062.26	Sep 26	5,618.47
Sep 12	11,648.69	Sep 29	5,007.44
Sep 15	11,440.70	Sep 30	4,886.54

## Activity Charge Summary For This Account

Activity	Volume	Price	Charge
FDIC Assessment Quarterly	4,886.54	.0000	0.15
Account Maintenance-W/ Chk Return	1.00	10.0000	10.00
Credits Posted	1.00	.3000	0.30
DDA Checks Paid	18.00	.1500	2.70
ACH Received Item	18.00	.0000	0.00

## Total September Activity Charge

BALANCE CREDIT - \$15 OF ACTIVITY CHARGES ARE WAIVED FOR EVERY \$1000 IN

INVESTABLE BALANCES AVAILABLE FOR SERVICES

NET ACTIVITY CHARGE IS DEBITED

\$79,988.08 IN ADDITIONAL BALANCES WOULD HAVE WAIVED THIS ACTIVITY CHARGE

13.15

+ 1.32

= 11.83

## For Your Interest

Your home is a powerful resource. Whether your goal is to improve your home, pay for college, or consolidate bills, a home equity account can help you do it. Now is a great time for you to take advantage of historically low rates and possible tax savings (consult your tax advisor). Apply today. Call 1-866-847-6410 or apply online at [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: Equity. Wells Fargo Banks. Equal Housing Lenders.

WELLS FARGO BANK MINNESOTA, N.A.  
V MPOE OFFICE  
ST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 4

1-3  
Account Number:  
Statement End Date:  
Number of Enclosures:

5,101  
520-1014471  
10/31/03  
26

|||||  
DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

10/03

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	4,886.54	3,919.34	- 7,855.94	949.94

### News from Wells Fargo

Take advantage of the new tax laws? Small businesses can now expense as much as \$100,000 of new equipment each year a \$75,000 increase over last year. If you are in the market for new equipment, an Equipment Finance program can offer you a competitive fixed interest rate and flexible terms, with no application costs and no prepayment penalty. Apply today with our quick application, and upon approval you'll have a full six months to use your loan. Simply talk with a banker, call 1-800-359-9557 ext. 603, or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter the keyword Equipment. Your business' tax advisor can inform you about whether an equipment purchase qualifies for these tax benefits.

### Active Business Checking nib 520-1014471

Daniel J Simon  
DBA Mid-West Ins Brokers

Sep 30 Beginning Balance

4,886.54

Oct 31 Ending Balance

949.94

### Deposits and Credits

Date	Transaction Detail	Amount
Oct 01	Check Crd Pur Rtrn 09/29 Eui*softwaresavings Pl 800-5593096 Ca 491989XXXXX6003 74718208HDRTA2Riv ?MCC=5399 091000019DA	19.95
Oct 03	Continental Gen. Mo Comm DD 100103 0098219 Daniel J Simon	1,951.78
Oct 14	F+g Life Agent Pymt 031011 NAA002078 Simon Daniel	364.78
Oct 14	Deposit	185.40
Oct 17	Deposit	529.00
Oct 27	Deposit	144.82
Oct 28	Deposit	334.62
Oct 28	Check Crd Pur Rtrn 10/27 Nutritional Health Ser 800-224-8912 Sc 491989XXXXX6003 74431869DWGTAZ8V0 ?MCC=5499 091000019DA	79.90
Oct 29	Deposit	309.09

Daniel J Simon  
Dba Mid-West Ins BrokersAccount Number:  
Statement End Date:5.102  
520-1014471  
10/31/03

## Withdrawals and Debits

Amount

Date	Transaction Detail	Amount
Oct 01	Check Crd Purchase 09/30 Textileshop.Com Inc. 201-332-0072 Nj 491989XXXXXX6003 24435658J034X4HH5 ?MCC=5969 091000019DA	- 30.99
Oct 02	Check Crd Purchase 10/01 First Choice Ce Com 770-5919581 Ga 491989XXXXXX6003 24773008K3JABD5B4 ?MCC=5942 091000019DA	- 39.95
Oct 03	Vallee D'Or Vill Payment 031003 Simon,Daniel Simon, Daniel	- 175.00
Oct 03	Check Crd Purchase 10/01 Turning Point Santee Ca 491989XXXXXX6003 24323008K7QTYK2JP ?MCC=5942 091000019DA	- 15.00
Oct 06	Client Analysis Srvc Chrg 031003 Svc Chge 0903 000005201014471	- 11.83
Oct 06	Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J	- 464.50
Oct 06	Naa Naa Dan Simon	- 195.00
Oct 14	Naa Naa Dan Simon	- 225.00
Oct 14	Check Crd Purchase 10/10 Machammond Ministries 763-3157071 MN 491989XXXXXX6003 24236278X0GMSK2Pw ?MCC=5973 091000019DA	- 64.95
Oct 14	Check Crd Purchase 10/10 Machammond Ministries 763-3157071 MN 491989XXXXXX6003 24236278X0Gmshhv ?MCC=5973 091000019DA	- 30.00
Oct 15	Brown And Brown Payment 031014 Danielj.Simon	- 41.42
Oct 15	Check Crd Purchase 10/14 Usps 2663650427 Minneapolis MN 491989XXXXXX6003 24401408Z018AG8Ew ?MCC=9402 091000019DA	- 41.04
Oct 16	Check Crd Purchase 10/14 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6003 24455018Z8QJBKG13 ?MCC=5411 091000019DA	- 12.21
Oct 20	Naa Naa Dan Simon	- 225.00
Oct 20	Check Crd Purchase 10/17 Juno Online * Svcs Www.Untd.Com Ca 491989XXXXXX6003 24610439203TQK55V ?MCC=4814 091000019DA	- 14.95
Oct 21	Consumer Loan Payment 031020 000000033060532 Nte*sph*acct 00033060532 Effective 10/2	- 105.70
Oct 22	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Oct 24	Check Crd Purchase 10/22 Micro Touch 973-808-7313 Nj 491989XXXXXX6003 2412479980032WT34 ?MCC=5399 091000019DA	- 20.98
Oct 27	Check Crd Purchase 10/23 Creflo Dollar Ministri 404-9960450 Ok 491989XXXXXX6003 243889499B22TP125 ?MCC=8661 091000019DA	- 20.00
Oct 28	Check Crd Purchase 10/28 Eui*premium Ink 800-230-7690 Ca 491989XXXXXX6003 24755999DEHREP0Gp ?MCC=5399 091000019DA	- 20.90
Oct 29	Check Crd Purchase 10/27 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6003 24455019Q8RMTBDA0 ?MCC=5411 091000019DA	- 44.46
Oct 30	Check Crd Purchase 10/29 Kuipers Ace Hardware Golden Valle MN 491989XXXXXX6003 24388949E6NAP0Xqy ?MCC=5251 091000019DA	- 9.02
Oct 31	Check Crd Purchase 10/30 Gordon Engstrand DDS Minnetonka MN 491989XXXXXX6003 24493989F8Avgvvjm ?MCC=8021 091000019DA	- 128.91
Oct 31	Prematic Corp Ins. Prem 103103 MLB08J145812 Simon, Daniel J 13	- 120.90
Oct 31	Check Crd Purchase 10/30 Subway # 26317 Golden Valley MN 491989XXXXXX6003 24455019F8Sglzwdy ?MCC=5814 091000019DA	- 6.04

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8212	Oct 10	20.00	8227	Oct 03	18.48
8213	Oct 02	25.00	8228	Oct 10	63.00
8216	Oct 08	20.96	8229	Oct 03	100.00
8217	Oct 06	325.31	8230	Oct 08	25.00
8218	Oct 06	22.62	8231	Oct 07	24.70
8219	Oct 06	334.62	8232	Oct 09	41.16
8220	Oct 14	192.50	8233	Oct 10	42.00
8221	Oct 07	910.33	8234	Oct 16	25.00
8222	Oct 06	23.40	8235	Oct 17	3,000.00
8223	Oct 03	29.00	8236	Oct 23	25.00
8224	Oct 09	56.48	8237	Oct 27	7.95
8225	Oct 08	77.44	8238	Oct 28	15.14
8226	Oct 06	72.98	8239	Oct 28	100.00

\* Gap in Check Sequence

WELLS FARGO BANK MINNESOTA, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 4

Account Number:  
Statement End Date:  
Number of Enclosures:

5,034  
520-1014471  
11/30/03  
21



DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

11/03

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	949.94	5,682.49	- 5,385.06	1,247.37

### Views from Wells Fargo

Showing changes are effective January 12, 2004. Insufficient Funds\*: Paid Item (OD), \$33/item. Returned Item (N.J.), \$30/item. For questions, please contact your Wells Fargo banker. We appreciate your business & look forward to continuing to serve your financial needs.

Effective March 15, 2004 for quarterly savings accounts.

### Active Business Checking nib 520-1014471

Daniel J Simon  
DBA Mid-West Ins Brokers

Oct 31	Beginning Balance	949.94
Nov 30	Ending Balance	1,247.37

### Deposits and Credits

Date	Transaction Detail	Amount
Nov 03	F+g Life Agent Pyrm 031030 NAA002078 Simon Daniel	295.40
Nov 05	Continental Gen. Mo Comm DD 110103 0098219 Daniel J Simon	2,077.90
Nov 05	Check Crd Pur Rtrn 11/03 The Home Depot 2806 St.Louis Park MN 491989XXXXX6003 74610439L09FARY9V ?MCC=5200 091000019DA	4.53
Nov 06	F+g Life Agent Pyrm 031105 NAA002078 Simon Daniel	103.03
Nov 10	F+g Life Agent Pyrm 031107 NAA002078 Simon Daniel	332.59
Nov 13	Deposit	35.10
Nov 19	Deposit	2,695.18
Nov 20	F+g Life Agent Pyrm 031119 NAA002078 Simon Daniel	114.86
Nov 28	Check Crd Pur Rtrn 11/27 Aol*online Service Cre 866-215-7772 VA 491989XXXXX6003 7469216AB00AM4GZ6 ?MCC=4816 091000019DA	23.90

### Withdrawals and Debits

Date	Transaction Detail	Amount
Nov 03	Vallee D'Or Vill Payment 031103 Simon,Daniel Simon, Daniel	- 175.00

continued on next page

000253

aniel J Simon  
Job Mid-West Ins Brokers

Account Number:  
Statement End Date:

520-1014471  
11/30/03

### Withdrawals and Debits

Date	Transaction Detail	Amount
Nov 04	Naa Naa Dan Simon	- 237.00
Nov 05	Client Analysis Srvc Chrg 031104 Svc Chge 1003 000005201014471	- 15.27
Nov 05	Brown And Brown Payment 031103 Danielj.Simon	- 41.42
Nov 05	Check Crd Purchase 11/03 The Home Depot 2806 St.Louis Park MN 491989XXXXXX6003 24610439L09Faryag ?MCC=5200 091000019DA	- 21.25
Nov 05	Check Crd Purchase 11/03 The Home Depot 2806 St.Louis Park MN 491989XXXXXX6003 24610439L09FARY8Y ?MCC=5200 091000019DA	- 20.48
Nov 06	Blue Cross Bs MN Blue X Pay 476467947000 Simon; Daniel J	- 464.50
Nov 10	Naa Naa-5 Dan Simon	- 225.00
Nov 10	Check Crd Purchase 11/08 P. I. Online Stores 805-543-2644 Ca 491989XXXXXX6003 24792629R6EHGXZ5Q ?MCC=5964 091000019DA	- 11.44
Nov 17	Naa Naa-5 Dan Simon	- 180.00
Nov 18	Check Crd Purchase 11/17 Juno Online * Svcs Www.Untd.Com Ca 491989XXXXXX6003 2461043A103T3X72W ?MCC=4814 091000019DA	- 14.95
Nov 21	Consumer Loan Payment 031120 000000033060532 Nte*sph*acct 00033060532 Effective 11/12	- 105.70
Nov 24	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Nov 24	Naa Naa 5 Dan Simon	- 150.00
Nov 24	Check Crd Purchase 11/23 Aol*online Service 110 866-215-7772 VA 491989XXXXXX6003 2469216A700312Rfh ?MCC=4816 091000019DA	- 23.90
Nov 25	Brown And Brown Payment 031123 Danielj.Simon	- 54.42

### Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8240	Nov 03	46.89	8251	Nov 17	50.00
8241	Nov 06	25.00	8252	Nov 21	50.00
8242	Nov 07	1,529.00	8253	Nov 19	200.00
8243	Nov 06	400.00	8254	Nov 21	41.55
8244	Nov 10	11.86	8255	Nov 25	41.16
8245	Nov 10	26.00	8256	Nov 24	131.93
8246	Nov 10	23.45	8257	Nov 21	202.24
8247	Nov 10	70.98	8258	Nov 25	260.00
8248	Nov 12	56.48	8259	Nov 24	100.00
8249	Nov 12	100.00	8260	Nov 25	34.07
8250	Nov 13	50.00			

### Daily Balance Summary

Date	Balance	Date	Balance
Oct 31	949.94	Nov 17	17.47
Nov 03	1,023.45	Nov 18	2.52
Nov 04	786.45	Nov 19	2,497.70
Nov 05	2,770.46	Nov 20	2,612.56
Nov 06	1,983.99	Nov 21	2,213.07
Nov 07	454.99	Nov 24	1,613.12
Nov 10	418.85	Nov 25	1,223.47
Nov 12	262.37	Nov 28	1,247.37
Nov 13	247.47		

### Activity Charge Summary For This Account

Activity	Volume	Price	Charge
Daily Use Of Uncoll Funds-Acct Lvl	0.04	1.0000	0.04
Account Maintenance W/ Chk Return	1.00	10.0000	10.00
Credits Posted	2.00	.3000	0.60
Deposited Checks - Transit	2.00	.0900	0.18
DDA Checks Paid	21.00	.1500	3.15
ACH Received Item	14.00	.0000	0.00
Total November Activity Charge			13.97

000254

WELLS FARGO BANK MINNESOTA, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 5

4,842

Account Number:  
Statement End Date:  
Number of Enclosures:

(CO300)  
520-1014471  
12/31/03  
14

|||||  
DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

12/03

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Our Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	1,247.37	4,053.35	- 4,250.71	1,050.01

### News from Wells Fargo

Want to receive your statements in the mail? Get FREE, real-time access to your accounts with Wells Fargo Business Online Banking. View account balances and review account activity including deposits, cleared checks, and payments and credit card transactions - anytime, anywhere. Enroll in Wells Fargo Business Online Banking at [wellsfargo.com/biz/bankonline](http://wellsfargo.com/biz/bankonline) member FDIC.

### Active Business Checking nib 520-1014471

Daniel J Simon  
Dba Mid-West Ins Brokers

Nov 30	Beginning Balance	1,247.37
Dec 31	Ending Balance	1,050.01

### Deposits and Credits

Date	Transaction Detail	Amount
Dec 01	Deposit	214.57
Dec 03	Continental Gen. Mo Comm DD 112703 0098219 Daniel J Simon	2,264.02
Dec 04	Deposit	600.00
Dec 04	Check Crd Pur Rtrn 12/04 Eui*premium Ink 800-230-7690 Ca 491989XXXXX6003 7475599AJEHREFFF1 ?MCC=5399 091000019DA	20.90
Dec 10	Continental Gen. Adv Com DD 120503 0098219 Daniel J Simon	41.74
Dec 12	Deposit	35.10
Dec 19	F+g Life Agent Pymt 031218 NAA002078 Simon Daniel	139.44
Dec 23	V1215031295 Provisional Credit	382.12
Dec 24	Deposit	70.97
Dec 26	F+g Life Agent Pymt 031224 NAA002078 Simon Daniel	284.49

### Withdrawals and Debits

Date	Transaction Detail	Amount
Dec 01	Naa BATCH5 Dan Simon	- 225.00

000255

Amount  
- 225.00

Continued on next page

Daniel J Simon  
Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
12/31/03

## Withdrawals and Debits

Date	Transaction Detail	Amount
Dec 01	Prematic Corp Ins. Prem 120103 MLB08J145812 Simon, Daniel J 13	- 120.90
Dec 01	Check Crd Purchase 11/28 Live Link 866-331-4500 866-331-4500 PA 491989XXXXX6003 2419404AEWGNDYZZ9 ?MCC=5967 091000019DA	- 79.00
Dec 02	Check Crd Purchase 12/01 Life In The Word Inc. 636-349-0303 Mo 491989XXXXX6003 2441295AF09A0VLOS ?MCC=5969 091000019DA	- 50.00
Dec 02	Brown And Brown Payment 031130 Danielj.Simon	- 41.42
Dec 03	Vallee D'Or Vill Payment 031203 Simon,Daniel Simon, Daniel	- 175.00
Dec 03	Check Crd Purchase 12/01 Rainbow Foods 1-885 Plymouth MN 491989XXXXX6003 2445501AG9T8TD8B3 ?MCC=5411 091000019DA	- 36.33
Dec 04	Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J	- 464.50
Dec 04	Check Crd Purchase 12/03 Pcg*talking Auto Pil 1 800-626-4901 Ny 491989XXXXX6003 2469216AH00P5E49Q ?MCC=5969 091000019DA	- 47.85
Dec 05	Client Analysis Srv Chrg 031204 Svc Chge 1103 000005201014471	- 13.83
Dec 05	Check Crd Purchase 12/04 Walgreen 00004309 Golden Valley MN 491989XXXXX6003 2439900AJ4480Bdyg ?MCC=5912 091000019DA	- 39.08
Dec 08	Check Crd Purchase 12/06 Netmgt *ccbill.com 888-596-9279 Az 491989XXXXX6003 2412061ANEKQ8Wbqa ?MCC=5967 091000019DA	- 2.95
Dec 10	Naa BATCH4 Dan Simon	- 45.00
Dec 15	Check Crd Purchase 12/14 Paycom.Net *oaktrl Ca 800-893-8871 Ca 491989XXXXX6003 2440140AW1T2B299F ?MCC=5967 091000019DA	- 39.95
Dec 15	Check Crd Purchase 12/14 Paycom.Net *ylti Ca 800-893-8871 Ca 491989XXXXX6003 2440140AW1T2B29B0 ?MCC=5967 091000019DA	- 39.95
Dec 15	Check Crd Purchase 12/14 Paycom.Net *ylti Ca 800-893-8871 Ca 491989XXXXX6003 2440140AW1T2B29Tz ?MCC=5967 091000019DA	- 39.95
Dec 15	Check Crd Purchase 12/14 B & C Marketing Inc 801-352-9223 Ut 491989XXXXX6003 2449398AX4Ywapvxd ?MCC=5399 091000019DA	- 4.83
Dec 15	Check Crd Purchase 12/13 Holiday Stationstore Golden Valley MN 491989XXXXX6003 2471705AWL5VEBY4D ?MCC=5541 091000019DA	- 4.22
Dec 15	Check Crd Purchase 12/14 Paycom.Net *nuview Ca 800-893-8871 Ca 491989XXXXX6003 2440140AW1T2B299P ?MCC=5967 091000019DA	- 2.68
Dec 16	Check Crd Purchase 12/16 Fdm-Fdbuy.Com 310-779-5264 Hi 491989XXXXX6003 2422369AYH7982Htg ?MCC=5945 091000019DA	- 57.85
Dec 16	Check Crd Purchase 12/14 Idishnetwork.Com 801-278-5494 Ut 491989XXXXX6003 2476501AX0001K65V ?MCC=4816 091000019DA	- 49.99
Dec 16	Check Crd Purchase 12/14 Idishnetwork.Com 801-278-5494 Ut 491989XXXXX6003 2476501AX00020Nmy ?MCC=4816 091000019DA	- 49.99
Dec 16	Check Crd Purchase 12/15 Paycom.Net *nuview Ca 800-893-8871 Ca 491989XXXXX6003 2440140AX1T2B2Qbm ?MCC=5967 091000019DA	- 29.95
Dec 16	Check Crd Purchase 12/14 Surplus Liquidators 801-7855411 Ut 491989XXXXX6003 2472187AY10G68D5B ?MCC=5310 091000019DA	- 19.95
Dec 16	Check Crd Purchase 12/14 Surplus Liquidators 801-7855411 Ut 491989XXXXX6003 2472187AY10G68D6D ?MCC=5310 091000019DA	- 19.95
Dec 16	Check Crd Purchase 12/15 A D Kessler Person 801-495-2405 Ut 491989XXXXX6003 2449215AXPW783All ?MCC=2741 091000019DA	- 6.95
Dec 16	Check Crd Purchase 12/14 Bridgeport Labs. Ltd. 800-620-6883 Mh 491989XXXXX6003 2460190AXA52PEQE3 ?MCC=5964 091000019DA	- 4.95
Dec 16	Check Crd Purchase 12/15 Paycom.Net *sireh Ca 800-893-8871 Ca 491989XXXXX6003 2440140AX1T2B29Ap ?MCC=5967 091000019DA	- 1.98
Dec 16	Check Crd Purchase 12/15 Paycom.Net *ylti Ca 800-893-8871 Ca 491989XXXXX6003 2440140AX1T2B29BT ?MCC=5967 091000019DA	- 1.98
Dec 16	Check Crd Purchase 12/14 Prescriptionbilling.Co 386-615-4859 FI 491989XXXXX6003 2407105AXWPQJOE00 ?MCC=4816 091000019DA	- 1.00
Dec 16	Check Crd Purchase 12/15 Mwi*connections 800-568-2386 Ct 491989XXXXX6003 2469216AX00KN1Qej ?MCC=5968 091000019DA	- 1.00
Dec 16	Check Crd Purchase 12/15 Mwi*simple ESCAPES2 877-836-6903 Ct 491989XXXXX6003 2469216AX00KNX1Vb ?MCC=5969 091000019DA	- 1.00
Dec 16	Check Crd Purchase 12/15 Mwi*homeworks Plus 888-681-7216 Ct 491989XXXXX6003 2469216AX00KNXYX4 ?MCC=5968 091000019DA	- 1.00
Dec 16	Check Crd Purchase 12/15 Mwi*galleria USA 800-411-8104 Ct 491989XXXXX6003 2469216AX00KRFTJ6 ?MCC=5969 091000019DA	- 1.00
Dec 16	Check Crd Purchase 12/15 Mwi*galleria USA 800-411-8104 Ct 491989XXXXX6003 2469216AX00Krjxpj ?MCC=5969 091000019DA	- 1.00
Dec 16	Check Crd Purchase 12/15 Mwi*privacy Plus 800-544-3738 Ct 491989XXXXX6003 2469216AX00KRM2M7 ?MCC=5966 091000019DA	- 1.00

Daniel J Simon  
Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
12/31/03

## Withdrawals and Debits

Date	Transaction Detail	Amount
Dec 16	Check Crd Purchase 12/15 Mwi*premierhealth Plus 800-313-1757 Ct 491989XXXXX6003 2469216AX00KT14E0 ?MCC=5969 091000019DA	- 1.00
Dec 17	Check Crd Purchase 12/13 French Meadow Bakery Minneapolis MN 491989XXXXX6003 2423627AY0Gmsyevz ?MCC=5812 091000019DA	- 10.65
Dec 17	Check Crd Purchase 12/13 French Meadow Bakery Minneapolis MN 491989XXXXX6003 2423627AY0Gmsyrln ?MCC=5812 091000019DA	- 5.45
Dec 22	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Dec 23	Naa BATCH4 Dan Simon	- 177.00
Dec 23	Consumer Loan Payment 031222 000000033060532 Nte*sph*acct 00033060532 Effective 12/2	- 105.70
Dec 29	Check Crd Purchase 12/27 Lakewood Church 713-4911123 Tx 491989XXXXX6011 2476420BAS662ZBP8 ?MCC=8398 091000019DA	- 25.00
Dec 31	Prematic Corp Ins. Prem 123103 MLB08J145812 Simon, Daniel J 13	- 120.90

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8261	Dec 03	100.00	8268	Dec 08	34.63
8262	Dec 09	41.16	8269	Dec 08	94.96
8263	Dec 08	56.71	8270	Dec 08	542.80
8264	Dec 08	64.65	8271	Dec 12	10.00
8265	Dec 08	23.45	8272	Dec 10	400.00
8266	Dec 08	58.99	8273	Dec 16	42.78
8267	Dec 10	117.78	8274	Dec 24	300.00

## Daily Balance Summary

Date	Balance	Date	Balance
Nov 30	1,247.37	Dec 15	1,406.13
Dec 01	1,037.04	Dec 16	1,111.81
Dec 02	945.62	Dec 17	1,095.71
Dec 03	2,898.31	Dec 19	1,235.15
Dec 04	3,006.86	Dec 22	1,041.03
Dec 05	2,953.95	Dec 23	1,140.45
Dec 08	2,074.81	Dec 24	911.42
Dec 09	2,033.65	Dec 26	1,195.91
Dec 10	1,512.61	Dec 29	1,170.91
Dec 12	1,537.71	Dec 31	1,050.01

## Activity Charge Summary For This Account

Activity	Volume	Price	Charge
FDIC Assessment Quarterly	1,050.01	.0000	0.03
Account Maintenance W/ Chk Return	1.00	10.0000	10.00
Credits Posted	5.00	.3000	1.50
Photocopy - Item	1.00	10.0000	10.00
Deposited Checks - Transit	1.00	.0900	0.09
IDA Checks Paid	14.00	.1500	2.10
ACH Received Item	11.00	.0000	0.00

Total December Activity Charge

23.72-

BALANCE CREDIT: \$.15 OF ACTIVITY CHARGES ARE WAIVED FOR EVERY \$1000 IN  
LIVESTABLE BALANCES AVAILABLE FOR SERVICES

+ .23

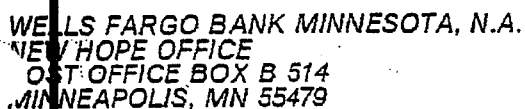
NET ACTIVITY CHARGE IS DEBITED

= 23.49

\$153,646.88 IN ADDITIONAL BALANCES WOULD HAVE WAIVED THIS ACTIVITY CHARGE

000257





Page 1 of 4 4,673  
Account Number:  
Statement End Date:  
Number of Enclosures:

(CO300)  
520-1014471  
01/31/04  
19

DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

1/04

## Four Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 320-1014471	1,050.01	5,634.20	- 6,121.41	562.80

## ***lews from Wells Fargo***

**e Business Checking nib 520-1014471**

**Daniel J Simon**  
**Dbm Mid-West Ins Brokers**

<b>Dec 31</b>	<b>Beginning Balance</b>	<b>1,050.01</b>
<b>Jan 31</b>	<b>Ending Balance</b>	<b>562.80</b>

## Deposits and Credits

Date	Transaction Detail	Amount
Jan 05	F+g Life Agent Pymt 040103 NAA002078 Simon Daniel	251.08
Jan 06	Continental Gen. Mo Comm DD 010104 0098219 Daniel J Simon	3,226.51
Jan 12	Deposit	16.70
Jan 13	Deposit	35.10
Jan 14	Check Crd Pur Rtrn 01/13 Pcg*talking Auto Pilot 800-626-4901 Ny 491989XXXXXX6003 7469216QX00QZQRM0 ?MCC=5969 091000019DA	39.90
Jan 20	Deposit	1,500.00
Jan 20	Check Crd Pur Rtrn 01/16 Ultimate Vitality Daytona Beach Fl 491989XXXXXX6011 7405522D000MWS0P4 ?MCC=5499 091000019DA	2.95
Jan 26	Deposit	309.09
Jan 29	Deposit	152.76
Jan 30	F+g Life Agent Pymt 040129 NAA002078 Simon Daniel	100.11

## Withdrawals and Debits

Date	Transaction Detail	Amount
Jan 05	Client Analysis Srvc Chrg 040102 Svc Chge 1203 000005201014471	- 23.49
Jan 05	Check Crd Purchase 01/02 Golden Valley Tire & S Golden Valley MN 491989XXXXXX6011 2432301QK3BG8B4Xq ?MCC=5533 091000019DA	- 182.08
Jan 05	Vallee D'Or Vill Payment 040105 Simon,Daniel Simon, Daniel	- 175.00
Jan 05	Check Crd Purchase 01/02 lpay-Int-Billing.Com 423-6141931 Kn 491989XXXXXX6011 7474147QK0060NJ6X ?MCC=5967 091000019DA	- 1.95

*continued on next page*

~~000258~~

Account Number:  
Statement End Date:520-1014471  
01/31/04Daniel J Simon  
West Ins Brokers

## Withdrawals and Debits

Date	Transaction Detail	Amount
Jan 06	Check Crd Purchase 01/05 lpay-Int-Billing.Com 423-6141931 Kn 491989XXXXXX6011 7474147QN00EZZ8V5 ?MCC=5967 091000019DA	- 34.95
Jan 07	Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J	- 464.50
Jan 07	Check Crd Purchase 01/06 Glass Endeavors Minneapolis MN 491989XXXXXX6011 2424651QP602K1Zfp ?MCC=5950 091000019DA	- 60.88
Jan 07	Check Crd Purchase 01/07 Eui*premium Ink 800-230-7690 Ca 491989XXXXXX6011 2475599QPEHRE457V ?MCC=5399 091000019DA	- 20.90
Jan 08	Check Crd Purchase 01/07 Life In The Word Inc. 636-349-0303 Mo 491989XXXXXX6011 2441295QP09A0V4E9 ?MCC=5969 091000019DA	- 50.00
Jan 09	Check Crd Purchase 01/07 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6011 2445501QR07WK818Y ?MCC=5411 091000019DA	- 67.02
Jan 09	Check Crd Purchase 01/08 Ultimate Vitality 386-677-6997 FI 491989XXXXXX6011 2405522QR00MWS0NZ ?MCC=5499 091000019DA	- 2.95
Jan 14	At&f Wireless Checkpaymt 011404 08277 A000000010323475304013	- 56.71
Jan 20	Naa BATCH5 Dan Simon	- 225.00
Jan 20	Check Crd Purchase 01/17 Juno Online * Svcs-Www.Untd.Com Ca 491989XXXXXX6011 2461043D203R3Dkzp ?MCC=4814 091000019DA	- 29.90
Jan 20	Check Crd Purchase 01/18 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6011 2445501D30J4QX8NI ?MCC=5411 091000019DA	- 3.60
Jan 21	Consumer Loan Payment 040120 000000033060532 Nte*sph*acct 00033060532 Effective 01/2	- 105.70
Jan 22	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Jan 26	Check Crd Purchase 01/23 Pii*showtime Bbq 888-486-1806 Ca 491989XXXXXX6011 2469216D70032R652 ?MCC=5969 091000019DA	- 43.16
Jan 28	Check Crd Purchase 01/26 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6011 2445501DB0Tjsdkxx ?MCC=5411 091000019DA	- 43.93

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8275	Jan 07	300.00	8286	Jan 12	200.00
8276	Jan 13	327.42	8287	Jan 23	54.98
8278	Jan 13	44.35	8288	Jan 30	1,500.00
8279	Jan 12	23.50	8289	Jan 13	215.83
8280	Jan 09	19.04	8291 *	Jan 12	100.00
8281	Jan 09	159.38	8292	Jan 15	160.25
8282	Jan 12	13.03	8293	Jan 21	500.00
8283	Jan 15	22.02	8296 *	Jan 27	150.00
8284	Jan 14	136.48	8301 *	Jan 30	400.00
8285	Jan 13	9.29			

\* Gap in Check Sequence

## Daily Balance Summary

Date	Balance	Date	Balance
Dec 31	1,050.01	Jan 20	2,992.73
Jan 05	978.57	Jan 21	2,387.03
Jan 06	4,110.13	Jan 22	2,192.91
Jan 07	3,263.85	Jan 23	2,137.93
Jan 08	3,213.85	Jan 26	2,403.86
Jan 09	2,965.46	Jan 27	2,253.86
Jan 12	2,645.63	Jan 28	2,209.93
Jan 13	2,083.84	Jan 29	2,362.69
Jan 14	1,930.55	Jan 30	562.80
Jan 15	1,748.28		

000259

WELLS FARGO BANK, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 4

1-3 5,187  
Account Number:  
Statement End Date:  
Number of Enclosures:

(CO300)  
520-1014471  
02/29/04  
18



DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

2/04

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	562.80	5,938.95	- 5,920.19	581.56

### News from Wells Fargo

Following changes are effective April 1, 2004. Stop Payment initiated by PC (through CEO) will be \$20 per item. Other Stop Payments will be \$29 per item. Operator Assisted Photocopies will be \$10. PC Inquiry (through CEO) will be \$0.95 per item. Electronic Delivery Photocopy Request by PC (through CEO) will be \$3.50. CEO EDI Subscription Per Account will be \$80 for one account; \$40 for additional accounts. Vault Currency Furnished per Bundle will be \$0.70 per \$1,000. Internet ACH Base Fee will be \$25 per month. Internet ACH Batch Release will be \$5. Internet ACH Same Day Item will be \$1.50. WellsTAX Payment will be \$2.50. WellsTAX Receipt will be \$2. Also, to complete as many of your Bill Pay transactions as possible, Wells Fargo is enhancing the Bill Pay Service processing procedures. If you schedule a payment through your Bill Pay Service, and there are not sufficient funds in your account to cover the transaction on the payment date, Wells Fargo may take any of the following actions:

- Cover the transaction if you have overdraft protection;
- Pay the transaction and create an overdraft to your account; or
- Decline the transaction.

You may be assessed a fee, which will vary depending on the action taken. If you do not have overdraft protection, we encourage you to contact your local banker, call 1-800-225-5935, or visit us Online to enroll.

Also effective April 1, 2004, if a check drawn against your Wells Fargo account is presented over-the-counter by a person who does not have a deposit account at Wells Fargo, the bank will charge a \$5 fee per check to the person presenting the check as a condition for paying the check. Please contact your banker if you have questions or if you are required for any reason to have a place where your checks can be cashed without a fee.

The following changes are effective June 1, 2004. \*Wire Fees: Outgoing Repetitive Domestic/International Transfer will be \$22. Outgoing Repetitive International (US Currency) will be \$38. Outgoing Repetitive International (Foreign Currency) will be \$28. We appreciate your business and look forward to continuing to serve your financial needs.

\*Different fees may apply in Hudson, WI.

000260

Daniel J Simon  
dba Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
02/29/04

Active Business Checking nib 520-1014471

Daniel J Simon  
Dbas Mid-West Ins Brokers

Jan 31	Beginning Balance	562.80
Feb 29	Ending Balance	581.56

## Deposits and Credits

Date	Transaction Detail	Amount
Feb 02	F+g Life Agent Pymt 040131 NAA002078 Simon Daniel	724.13
Feb 04	Continental Gen. Mo Comm DD 013104 0098219 Daniel J Simon	3,071.21
Feb 10	Deposit	223.96
Feb 13	Continental Gen. Adv Com DD 021004 0098219 Daniel J Simon	59.82
Feb 17	Overdraft Protection From 30090382130001	500.00
Feb 19	Overdraft Protection From 30090382130001	500.00
Feb 23	F+g Life Agent Pymt 040220 NAA002078 Simon Daniel	118.55
Feb 27	Deposit	241.28
Feb 27	Overdraft Protection From 30090382130001	500.00

## Withdrawals and Debits

Date	Transaction Detail	Amount
Feb 02	Naa BATCH4 Dan Simon	- 225.00
Feb 02	Prematic Corp Ins. Prem 020204 MLB08J145812 Simon, Daniel J 13	- 120.90
Feb 02	Check Crd Purchase 01/30 Life In The Word Inc. 636-349-0303 Mo 491989XXXXXX6011 2441295DE09A0Vfgh ?MCC=5969 091000019DA	- 6.00
Feb 03	Vallee D'Or Vill Payment 040203 Simon, Daniel Simon, Daniel	- 175.00
Feb 03	Brown And Brown Payment 040201 Daniel J Simon	- 54.42
Feb 03	Check Crd Purchase 02/03 Ccbill.com * 888-596-9279 Az 491989XXXXXX6011 2412061DJEKQ8TKL9 ?MCC=5967 091000019DA	- 2.95
Feb 05	Client Analysis Svc Chrg 040204 Svc Chge 0104 000005201014471	- 14.31
Feb 05	Blue Cross Bs MN Blue X Pay 476467947000 Simon, Daniel J	- 464.50
Feb 06	Check Crd Purchase 02/05 Life In The Word Inc. 636-349-0303 Mo 491989XXXXXX6011 2441295DL09A0W2Vm ?MCC=5969 091000019DA	- 142.00
Feb 09	Naa BATCH5 Dan Simon	- 225.00
Feb 09	Check Crd Purchase 02/07 Walgreen 00004309 Golden Valley MN 491989XXXXXX6011 2439900DN449W0Eeg ?MCC=5912 091000019DA	- 120.21
Feb 09	Check Crd Purchase 02/06 Live Link 866-331-4500 866-331-4500 PA 491989XXXXXX6011 2419404DPWGN DYVL 9 ?MCC=5967 091000019DA	- 79.00
Feb 11	AT&T Wirefess Checkpaymt 021104 08311 A000000010323475304041	- 56.64
Feb 12	Check Crd Purchase 02/11 Upc*vistaprint.Com 781-890-8434 Ma 491989XXXXXX6011 2469216DS009FJX0T ?MCC=2741 091000019DA	- 5.25
Feb 17	Naa Batch 6 Dan Simon	- 225.00
Feb 17	Check Crd Purchase 02/16 Gordon Engstrand DDS Minnetonka MN 491989XXXXXX6011 24493980Z60BAXKJ2 ?MCC=8021 091000019DA	- 71.05
Feb 17	Check Crd Purchase 02/12 Idea Village 973-808-7355 Nj 491989XXXXXX6011 2412479DW003NXM4J ?MCC=5399 091000019DA	- 30.97
Feb 18	Check Crd Purchase 02/16 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6011 2445501E01D4NW6Xy ?MCC=5411 091000019DA	- 51.33
Feb 18	Check Crd Purchase 02/17 Juno Online * Svcs Www.Untd.Com Ca 491989XXXXXX6011 2461043E003T30B00 ?MCC=4814 091000019DA	- 14.95
Feb 23	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Feb 23	Consumer Loan Payment 040220 000000033060532 Nte*sph*acct 00033060532 Effective 02/2	- 105.70
Feb 24	Check Crd Purchase 02/24 Eui*premium Ink 877-465-7487 Ca 491989XXXXXX6011 2475599E7EHREZH6T ?MCC=5399 091000019DA	- 43.85
Feb 24	Check Crd Purchase 02/23 Tel*one Sweep 800-777-4034 Nj 491989XXXXXX6011 2469216E6001SLRP7 ?MCC=5969 091000019DA	- 28.97
Feb 24	Check Crd Purchase 02/23 Pii*showtime Bbq 888-486-1806 Ca 491989XXXXXX6011 2469216E6002Q0Wav ?MCC=5969 091000019DA	- 26.36
Feb 27	Check Crd Purchase 02/26 Gth*leslie Sansone Fit 800-350-7115 Ny 491989XXXXXX6011 2469216E9007HL42B ?MCC=5968 091000019DA	- 199.80

000261 199.80



Daniel J Simon  
7ba Mid-West Ins Brokers

Account Number:  
Statement End Date:

520-1014471  
02/29/04

**Withdrawals and Debits**

Date	Transaction Detail	Amount
Feb 27	Check Crd Purchase 02/26 Gth*leslie Sansone Fit 800-350-7115 Ny 491989XXXXXX6011 2469216E9007Hlrgd ?MCC =5968 091000019DA	- 31.85

**Checks Paid**

Check #	Date	Amount	Check #	Date	Amount
8295	Feb 05	333.00	8307	Feb 09	24.50
8297 *	Feb 02	21.05	8308	Feb 09	300.00
8299 *	Feb 02	50.00	8309	Feb 10	81.26
8300	Feb 02	52.80	8310	Feb 10	11.92
8302 *	Feb 03	20.57	8312 *	Feb 19	205.76
8303	Feb 17	1,460.66	8313	Feb 09	74.00
8304	Feb 06	207.43	8314	Feb 10	100.00
8305	Feb 10	67.76	8317 *	Feb 19	100.00
8306	Feb 10	44.35	8318	Feb 27	50.00

\* Gap in Check Sequence

**Daily Balance Summary**

Date	Balance	Date	Balance
Jan 31	562.80	Feb 12	1,502.28
Feb 02	811.18	Feb 13	1,562.10
Feb 03	558.24	Feb 17	274.42
Feb 04	3,629.45	Feb 18	208.14
Feb 05	2,817.64	Feb 19	402.38
Feb 06	2,468.21	Feb 23	221.11
Feb 09	1,645.50	Feb 24	121.93
Feb 10	1,564.17	Feb 27	581.56
Feb 11	1,507.53		

**Activity Charge Summary For This Account**

Activity	Volume	Price	Charge
Account Maintenance W/ Chk Return	1.00	10.0000	10.00
Debit Items	-1.00	.1500	-0.15
Credits Posted	5.00	.3000	1.50
Deposited Checks - Transit	1.00	.0900	0.09
DDA Checks Paid	19.00	.1500	2.85
ACH Received Item	13.00	.0000	0.00

**Total February Activity Charge**

14.29

BALANCE CREDIT: \$14 OF ACTIVITY CHARGES ARE WAIVED FOR EVERY \$1000 IN

INVESTABLE BALANCES AVAILABLE FOR SERVICES

+ .15

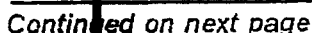
NET ACTIVITY CHARGE IS DEBITED

= 14.14

\$99,108.70 IN ADDITIONAL BALANCES WOULD HAVE WAIVED THIS ACTIVITY CHARGE

For Your Interest

000262



Daniel J Simon  
Dan Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
03/31/04

## Withdrawals and Debits

Date	Transaction Detail	Amount
Mar 01	Naa Batch 6 Dan Simon	- 195.00
Mar 01	Prematic Corp Ins. Prem 030104 MLB08J145812 Simon, Daniel J 13	- 121.55
Mar 01	Check Crd Purchase 02/27 Cub Foods, Inc. Crystal MN 491989XXXXXX6011 2445501EA1ND0QED1 ?MCC=5411 091000019DA	- 75.20
Mar 01	Check Crd Purchase 02/28 Eui*all You Can Ink 800-460-5020 Ca 491989XXXXXX6011 2475599EDEHRQ9D4J ?MCC=5399 091000019DA	- 23.95
Mar 02	Deluxe Check Check/Acc. 040227 X	- 43.00
Mar 02	Brown And Brown Payment 040229 Danielj.Simon	- 54.42
Mar 03	Vallee D'Or Vill Payment 040303 Simon, Daniel Simon, Daniel	- 175.00
Mar 04	Blue Cross Bs MN Blue X Pay XZ2185943000 Simon, Daniel J	- 464.50
Mar 04	Check Crd Purchase 02/29 Superamerica 4388 Minneapolis MN 491989XXXXXX6011 2442363EFNQW647Ld ?MCC=5542 091000019DA	- 20.00
Mar 05	Client Analysis Srvs Chrg 040304 Svc Chge 0204 000005201014471	- 14.14
Mar 08	Naa BATCH6 Dan Simon	- 105.00
Mar 10	Check Crd Purchase 03/09 Walgreen 00004309 Golden Valley MN 491989XXXXXX6011 2439900EM44APP70N ?MCC=5912 091000019DA	- 39.08
Mar 10	Check Crd Purchase 03/09 Walgreen 00004309 Golden Valley MN 491989XXXXXX6011 2439900EM44APRK0D ?MCC=5912 091000019DA	- 6.38
Mar 11	Check Crd Purchase 03/11 Ccbill.com *click Fee 888-596-9279 Nv 491989XXXXXX6011 2412061EPEKQ941Sx ?MCC=5967 091000019DA	- 5.00
Mar 11	Check Crd Purchase 03/11 Ccbill.com *offendale 888-596-9279 Oh 491989XXXXXX6011 2412061EPEKQ8Npkl ?MCC=5967 091000019DA	- 2.95
Mar 15	Naa BATCH6 Dan Simon	- 225.00
Mar 15	Check Crd Purchase 03/13 Live Link 866-331-4500 866-331-4500 PA 491989XXXXXX6011 2419404Eswgndyslp ?MCC=5967 091000019DA	- 79.00
Mar 15	Check Crd Purchase 03/13 Red Lobster US00001578 Golden Valley MN 491989XXXXXX6011 2439900ES40GP4TOP ?MCC=5812 091000019DA	- 30.00
Mar 15	Check Crd Purchase 03/12 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6011 2445501ET24Dtgobj ?MCC=5411 091000019DA	- 18.64
Mar 16	Check Crd Purchase 03/15 Jmministries.Org 314-349-0303 Mo 491989XXXXXX6011 2441295EV00850Nnd ?MCC=5969 091000019DA	- 59.00
Mar 16	At&t Wireless Checkpaymt 031504 08324 A000000010323475304073	- 56.64
Mar 16	Check Crd Purchase 03/16 Ccbill.com *click Fee 888-596-9279 Nv 491989XXXXXX6011 2412061EWEKQ9Fdqt ?MCC=5967 091000019DA	- 29.95
Mar 18	Check Crd Purchase 03/17 Juno Online Svcs Www.Untd.Com Ca 491989XXXXXX6011 2461043EX03T6Mkhf ?MCC=4814 091000019DA	- 14.95
Mar 19	Check Crd Purchase 03/18 Mwi*businessmax 888-840-6296 Ct 491989XXXXXX6011 2469216EY00Jbbfxg ?MCC=5968 091000019DA	- 9.95
Mar 22	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Mar 22	Superior Perform Batch 6 Dan Simon	- 135.00
Mar 22	Check Crd Purchase 03/18 Golden Valley Tire & S Golden Valley MN 491989XXXXXX6011 2432301EZ3BG8Xepm ?MCC=5533 091000019DA	- 25.56
Mar 23	Consumer Loan Payment 040322 000000033060532 Nte*sph*acct 00033060532 Effective 03/2	- 105.70
Mar 24	Check Crd Purchase 03/23 Ipay-Friendfinder 650-8473100 Kn 491989XXXXXX6011 7474147F407PEKZ6D ?MCC=5967 091000019DA	- 35.97
Mar 24	Check Crd Purchase 03/23 Pii*showtime Bbq 888-486-1806 Ca 491989XXXXXX6011 2469216F300WQTBV9 ?MCC=5969 091000019DA	- 27.17
Mar 24	Check Crd Purchase 03/22 Ewtn Religious Catalog 205-2712900 Al 491989XXXXXX6011 2476420F3S66Gdmmdm ?MCC=8661 091000019DA	- 10.00
Mar 29	Naa Batch 6 Dan Simon	- 230.00
Mar 30	Overdraft Fee	- 33.00
Mar 30	Check Crd Purchase 03/28 Barnes & Noble #2514 Edina MN 491989XXXXXX6011 2444500F9NXE3648L ?MCC=5942 091000019DA	- 21.25
Mar 31	Overdraft Fee	- 33.00
Mar 31	Safe Box Annual Fee MN-MAR10022-2519	- 70.00
Mar 31	Prematic Corp Ins. Prem 033104 MLB08J145812 Simon, Daniel J 13	- 119.91
Mar 31	Check Crd Purchase 03/28 Superamerica 4615 Richfield MN 491989XXXXXX6011 2442363FANYABETB9 ?MCC=5541 091000019DA	- 36.22

000264

Account Number:  
Statement End Date:

520-1014471  
03/31/04

Daniel J Simon  
Dba Mid-West Ins Brokers

**Checks Paid**

Check #	Date	Amount	Check #	Date	Amount
8319	Mar 08	50.00	8328	Mar 18	50.00
8320	Mar 04	300.00	8329	Mar 29	86.81
8321	Mar 11	79.57	8330	Mar 26	44.35
8322	Mar 09	65.94	8331	Mar 23	178.36
8323	Mar 12	20.00	8332	Mar 24	58.58
8325 *	Mar 12	22.70	8333	Mar 26	1,709.00
8326	Mar 10	103.17	8334	Mar 24	100.00
8327	Mar 12	50.00	8335	Mar 29	548.56

\* Gap in Check Sequence

**Daily Balance Summary**

Date	Balance	Date	Balance
Feb 29	581.56	Mar 16	1,559.73
Mar 01	192.84	Mar 17	1,585.63
Mar 02	95.42	Mar 18	1,520.68
Mar 03	2,100.41	Mar 19	1,510.73
Mar 04	1,315.91	Mar 22	1,592.89
Mar 05	1,301.77	Mar 23	1,318.78
Mar 08	1,780.77	Mar 24	1,087.06
Mar 09	2,117.56	Mar 26	333.71
Mar 10	1,995.83	Mar 29	- 67.43
Mar 11	1,908.31	Mar 30	- 121.68
Mar 12	1,815.61	Mar 31	- 380.81
Mar 15	1,705.32		

**Activity Charge Summary For This Account**

Activity	Volume	Price	Charge
Daily Use Of Uncoll Funds-Acct Lvl	0.13	1.0000	0.13
Account Maintenance W/ Chk Return	1.00	10.0000	10.00
Debit Items	-1.00	.1500	-0.15
Credits Posted	2.00	.3000	0.60
Deposited Checks - Transit	1.00	.0900	0.09
DDA Checks Paid	17.00	.1500	2.55
ACH Received Item	15.00	.0000	0.00

Total March Activity Charge

13.22-

BALANCE CREDIT: \$15 OF ACTIVITY CHARGES ARE WAIVED FOR EVERY \$1000 IN  
INVESTABLE BALANCES AVAILABLE FOR SERVICES

+ .18

NET ACTIVITY CHARGE IS DEBITED

= 13.04

\$85,532.47 IN ADDITIONAL BALANCES WOULD HAVE WAIVED THIS ACTIVITY CHARGE

For Your Interest

000265





WELLS FARGO BANK, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 4

4,381

Account Number:  
Statement End Date:  
Number of Enclosures:

(CO300)  
520-1014471  
04/30/04  
10

|||||

DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

4/04

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	- 380.81	6,757.48	- 6,123.80	252.87

### News from Wells Fargo

Save time by ordering your business checks through Wells Fargo. We offer a wide variety of styles to complement professional image. Whether your business requires the convenience of manual checks, or the efficiency of computer checks, we can help. Call 1-800-237-8982 to find out more or place an order.

### Active Business Checking nib 520-1014471

Daniel J Simon  
DBA Mid-West Ins Brokers

Mar 31	Beginning Balance	- 380.81
Apr 30	Ending Balance	252.87

### Deposits and Credits

Date	Transaction Detail	Amount
Apr 02	Overdraft Protection From 30090382130001	45.00
Apr 05	Continental Gen. Mo Comm DD 040104 C098219 Daniel J Simon	2,127.49
Apr 05	F+g Life Agent Pymt 040403 NAA002078 Simon Daniel	379.39
Apr 06	Overdraft Protection From 30090382130001	500.00
Apr 12	F+g Life Agent Pymt 040410 NAA002078 Simon Daniel	815.04
Apr 12	Deposit	143.70
Apr 12	Overdraft Protection From 30090382130001	500.00
Apr 19	F+g Life Agent Pymt 040417 NAA002078 Simon Daniel	173.68
Apr 22	Overdraft Protection From 30090382130001	500.00
Apr 23	Deposit	309.09
Apr 23	Check Crd Pur Rtrn 04/22 Mwi*galleria USA 800-411-8104 Ct 491989XXXXX6003 7469216G100SVFA0D ?MCC=5969 091000019DA	1.00
Apr 26	F+g Life Agent Pymt 040424 NAA002078 Simon Daniel	763.09
Apr 26	Overdraft Protection From 30090382130001	500.00

000266

Continued on next page

Daniel J Simon  
Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
04/30/04

## Withdrawals and Debits

Date	Transaction Detail	Amount
Apr 01	Overdraft Fee	- 33.00
Apr 01	Wells Fargo Bank Loan Pmt 040331 000090382130001 Simon Daniel J	- 58.89
Apr 02	Brown And Brown Payment 040401 Daniel J Simon	- 54.42
Apr 05	Overdraft Fee	- 33.00
Apr 05	Client Analysis Srv Chrg 040402 Svc Chge 0304 000005201014471	- 13.04
Apr 05	Naa Batch 6 Dan Simon	- 225.00
Apr 05	Vallee D'Or Vill Payment 040405 Simon, Daniel Simon, Daniel	- 175.00
Apr 06	Blue Cross Bs MN Blue X Pay XZ2185943000 Simon, Daniel J	- 524.00
Apr 09	Check Crd Purchase 04/09 Eui*premium Ink 877-465-7487 Ca 491989XXXXXX6011 2475599FLEHRE514S ?MCC=5399 091000019DA	- 62.85
Apr 12	Withdrawal Made In A Branch/Store	- 1,000.00
Apr 12	Naa Batch 6 Dan Simon	- 225.00
Apr 14	Check Crd Purchase 04/13 Joyce Meyer Ministries 636-349-0303 Mo 491989XXXXXX6011 2441295FR09A0V1Yy ?MCC=5969 091000019DA	- 150.00
Apr 14	Check Crd Purchase 04/13 Walgreen 00004309 Golden Valley MN 491989XXXXXX6011 2439900FR448XL53Z ?MCC=5912 091000019DA	- 36.62
Apr 15	Check Crd Purchase 04/14 Cub Foods Inc Crystal MN 491989XXXXXX6011 2445501FT325N5Dpt ?MCC=5411 091000019DA	- 33.14
Apr 19	Naa Batch 6 Dan Simon	- 225.00
Apr 19	Check Crd Purchase 04/17 Juno Online * Svcs Www.Juno.Com Ca 491989XXXXXX6011 2461043FX03T3WQ3M ?MCC=4814 091000019DA	- 14.95
Apr 20	Check Crd Purchase 04/18 Hp Parts Support 8002278164 Ca 491989XXXXXX6011 2400175FY985JD37R ?MCC=7379 091000019DA	- 40.00
Apr 22	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Apr 26	Tele-Transfer To 30090382130001 Reference # TFE4YC7227	- 1,000.00
Apr 26	Naa Batch 6 Dan Simon	- 225.00
Apr 26	Check Crd Purchase 04/25 Live Link 866-331-4500 866-331-4500 PA 491989XXXXXX6011 2419404G5Wgndywst ?MCC=5967 091000019DA	- 79.00
Apr 26	Check Crd Purchase 04/24 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6011 2445501G43QF9N30Z ?MCC=5411 091000019DA	- 41.24
Apr 30	Prematic Corp Ins Prem 043004 MLEB08J145812 Simon, Daniel J 13	- 119.91
Apr 30	Check Crd Purchase 04/28 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6011 2445501G83G6Fktmw ?MCC=5411 091000019DA	- 55.05

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8298	Apr 07	5.00	8340	Apr 05	1,000.00
8336	Apr 08	22.64	8341	Apr 05	100.00
8337	Apr 08	44.35	8342	Apr 19	100.00
8338	Apr 08	56.64	8343	Apr 26	56.94
8339	Apr 09	20.00	8344	Apr 23	100.00

\* Gap in Check Sequence

## Daily Balance Summary

Date	Balance	Date	Balance
Mar 31	- 380.81	Apr 14	290.36
Apr 01	- 472.70	Apr 15	257.22
Apr 02	- 482.12	Apr 19	90.95
Apr 05	478.72	Apr 20	50.95
Apr 06	454.72	Apr 22	356.83
Apr 07	449.72	Apr 23	566.92
Apr 08	326.09	Apr 26	427.83
Apr 09	243.24	Apr 30	252.87
Apr 12	476.98		

000207

WELLS FARGO BANK, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 4

1-3 4,498  
Account Number:  
Statement End Date:  
Number of Enclosures:

(CO300)  
520-1014471  
05/31/04  
12

|||||  
DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

5/04

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	252.87	4,309.08	- 4,179.34	382.61

### News from Wells Fargo

**IMPORTANT MESSAGE FOR CUSTOMERS WHO RECEIVE WIRE TRANSFERS:** Effective August 16, 2004 any wire transfer sent to Wells Fargo must use the following Wire Routing Transit Number (RTN): 121000248. If you are currently receiving funds by wire transfer, this may be a change for the sender. Although the new RTN MUST be used as of August 16, 2004, it may be used effective immediately. Therefore, to avoid delays, inform anyone sending wires to you at Wells Fargo to begin using the following wire instructions now:

**DIRECT TO:** Wire Routing Transit Number 121000248.

**BANK NAME:** Wells Fargo Bank, N.A.

**CITY, STATE:** San Francisco, CA (regardless of where your account is located)

**BENEFICIARY ACCOUNT NUMBER (BNF):** Your 10 digit Wells Fargo account number (If your number is less than 10 digits in length, use leading zeroes to convert the number to a 10-digit number)

**BENEFICIARY ACCOUNT NAME:** The name of your account as it appears on your statement

For wires sent from your Wells Fargo account and wire templates there is no change.

**Note:** There is no change to the RTNs used for checks, deposits, or ACH (direct deposit/debit) transactions. If you have questions, contact your Wells Fargo banker or call the customer service number printed on your statement.

### Active Business Checking nib 520-1014471

Daniel J Simon  
Dba Mid-West Ins Brokers

Apr 30 Beginning Balance

252.87

May 31 Ending Balance

382.61

### Deposits and Credits

Date Transaction Detail

Amount

May 03 Overdraft Protection From 30090382130001

500.00

May 05 Continental Gen. Mo Comm DD 043004 0098219 Daniel J Simon

2,060.38

May 10 F + g Life Agent Pymt 040508 NAA002078 Simon Daniel

128.10

000268

Daniel J. Simon  
Mid-West Ins BrokersAccount Number: 520-1014471  
Statement End Date: 05/31/04

## Deposits and Credits

Date	Transaction Detail	Amount
May 11	Overdraft Protection From 30090382130001	500.00
May 17	F+g Life Agent Pymt 040515 NAA002078 Simon Daniel	464.97
May 17	Deposit	20.00
May 18	Deposit	97.64
May 21	Shen Life Ins Co Comm Check 051904 000049560 0100 Daniel J Simon	162.75
May 24	F+g Life Agent Pymt 040522 NAA002078 Simon Daniel	116.06
May 27	Deposit	259.18

## Withdrawals and Debits

Date	Transaction Detail	Amount
May 03	Naa BATCH6 Dan Simon	- 225.00
May 03	Vallee D'Or VIII Payment 040503 Simon Daniel Simon Daniel	- 175.00
May 03	Wells Fargo Bank Loan Pmt 040430 000090382130001 Simon Daniel J	- 65.64
May 03	Check Crd Purchase 04/30 Bachmans Plymouth 006 Plymouth MN 491989XXXXXX6011 2432684GA1N0Hpgtn ?MCC=5261 091000019DA	- 17.13
May 03	Check Crd Purchase 04/30 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6011 2445501GA3J249Knl ?MCC=5411 091000019DA	- 11.38
May 04	Brown And Brown Payment 040502 Daniel J Simon	- 54.42
May 05	Client Analysis Svc Chrg 040504 Svc Chge 0404 000005201014471	- 14.32
May 05	Check Crd Purchase 05/01 Superamerica 4497 Golden Valley MN 491989XXXXXX6011 2442363GDPN7FG3Yx ?MCC=5541 091000019DA	- 29.12
May 06	Blue Cross Bs MN Blue X Pay XZ2185943000 Simon, Daniel J	- 524.00
May 10	Naa BATCH6 Dan Simon	- 225.00
May 10	Check Crd Purchase 05/08 Live Link 866-331-4500 866-331-4500 PA 491989XXXXXX6011 2419404GJWGN DYD7 ?MCC=5967 091000019DA	- 149.00
May 10	Check Crd Purchase 05/08 Usps 2663650427 Minneapolis MN 491989XXXXXX6011 2440140GJ01885Vmj ?MCC=9402 091000019DA	- 37.00
May 11	Check Crd Purchase 05/09 Kmart 00071894 Richfield MN 491989XXXXXX6011 132404106175716 ?MCC=5310 091000019DA	- 27.96
May 13	Check Crd Purchase 05/12 Pii showtime Bbq 888-486-1806 Ca 491989XXXXXX6011 134404105444864 ?MCC=5969 091000019DA	- 39.84
May 13	Check Crd Purchase 05/12 Callwave 188-777-2807 Ca 491989XXXXXX6011 134417100548899 ?MCC=5964 091000019DA	- 3.95
May 17	Naa BATCH5 Dan Simon	- 225.00
May 17	Check Crd Purchase 05/15 Walgreen 00004309 Golden Valley MN 491989XXXXXX6011 138404105454077 ?MCC=5912 091000019DA	- 41.14
May 18	Check Crd Purchase 05/17 Juno Online Svcs Www.Juno.Com Ca 491989XXXXXX6011 139404106692192 ?MCC=4814 091000019DA	- 14.95
May 21	Check Crd Purchase 05/20 Mcl Local Service 800-4364444 Co 491989XXXXXX6011 142404103016773 ?MCC=4814 091000019DA	- 83.66
May 24	Naa BATCH5 Dan Simon	- 225.00
May 24	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
May 26	Check Crd Purchase 05/24 Golden Valley Tire & S Golden Valley MN 491989XXXXXX6011 14740410343714 ?MCC=5533 091000019DA	- 90.31

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8345	May 04	100.00	8352	May 07	100.00
8346	May 11	1,006.76	8353	May 10	100.00
8347	May 10	44.38	8354	May 17	50.00
8348	May 10	23.24	8355	May 18	50.00
8350	May 12	25.34	8356	May 19	50.04
8351	May 11	56.64	8357	May 24	100.00

\* Gap in Check Sequence

## Daily Balance Summary

Date	Balance	Date	Balance
Apr 30	252.87	May 03	258.72

WELLS FARGO BANK, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
WINNEAPOLIS, MN 55479

Page 1 of 4

1-2 4,149  
Account Number:  
Statement End Date:  
Number of Enclosures:

(CO300)  
520-1014471  
06/30/04  
13



DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	382.61	5,102.91	5,393.31	92.21

### News from Wells Fargo

Get up to \$100,000 cash with a BusinessLine line of credit. Use it to:

- Cover unexpected or seasonal expenses
- Supplement your cash flow while you wait for payment from others
- Invest in new space, modernize, or upgrade
- Increase profit by purchasing inventory in bulk

Plus, get quick and easy access to your line of credit with free BusinessLine checks, and online or telephone transfers to your Wells Fargo checking account. Stop by your store, call 1-800-35 WELLS ext. 210 or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: 100K, for more information.

### Active Business Checking nib 520-1014471

Daniel J Simon  
Dba Mid-West Ins Brokers

May 31	Beginning Balance	382.61
Jun 30	Ending Balance	92.21

### Deposits and Credits

Date	Transaction Detail	Amount
Jun 01	F+g Life Agent Pymt 040529 NAA002078 Simon Daniel	347.62
Jun 03	Continental Gen. Mo Comm DD:052804 0098219 Daniel J Simon	1,812.92
Jun 07	F+g Life Agent Pymt 040605 NAA002078 Simon Daniel	148.32
Jun 14	F+g Life Agent Pymt 040612 NAA002078 Simon Daniel	711.36
Jun 21	F+g Life Agent Pymt 040619 NAA002078 Simon Daniel	1,027.52
Jun 21	Deposit	22.20
Jun 22	Overdraft Protection From 30090382130001	500.00
Jun 24	Overdraft Protection From 30090382130001	500.00
Jun 28	Deposit	20.00
Jun 28	Check Crd Pur Rtrn 06/25 Ipay-Friendfinder 650-8473100 Kn 491989XXXXXX6011 179404104780001 ?MCC=5967 091000019DA	12.97

Continued on next page

000270

Daniel J Simon  
ba Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
06/30/04**Withdrawals and Debits**

Date	Transaction Detail	Amount
Jun 01	Naa Batch 5 Dan Simon	- 225.00
Jun 01	Prematic Corp Ins. Prem 060104 MLB08J145812 Simon, Daniel J 13	- 119.91
Jun 01	Wells Fargo Bank Loan Pmt 040528 000090382130001 Simon Daniel J	- 94.57
Jun 02	Brown And Brown Payment 040531 Danielj.Simon	- 54.42
Jun 03	Vallee D'Or Vill Payment 040603 Simon, Daniel Simon, Daniel	- 175.00
Jun 04	Blue Cross Bs MN Blue X Pay XZ2185943000 Simon, Daniel J	- 524.00
Jun 04	Check Crd Purchase 06/03 Pansalcorp.Com 973-453-8128 Nj	
	491989XXXXXX6011 156404107281046 ?MCC=4816 091000019DA	- 9.95
Jun 07	Client Analysis Srvc Chrg 040604 Svc Chge 0504 000005201014471	- 13.30
Jun 07	Check Crd Purchase 06/04 Joyce Meyer Ministries 636-349-0303 Mo	
	491989XXXXXX6011 158404110681030 ?MCC=5969 091000019DA	- 100.00
Jun 07	Check Crd Purchase 06/04 Lakewood Church WD 713-6354154 Tx	
	491989XXXXXX6011 158404112272139 ?MCC=8661 091000019DA	- 50.00
Jun 07	Check Crd Purchase 06/03 Superamerica 4058 Brooklyn Cent MN	
	491989XXXXXX6011 158404107234542 ?MCC=5541 091000019DA	- 30.00
Jun 08	Naa Batch 5 Dan Simon	- 225.00
Jun 09	Check Crd Purchase 06/09 Callwave 188-777-2807 Ga	
	491989XXXXXX6011 161417100562710 ?MCC=5964 091000019DA	- 3.95
Jun 10	Check Crd Purchase 06/08 Rainbow Foods 1-885 Plymouth MN	
	491989XXXXXX6011 162404105303465 ?MCC=5411 091000019DA	- 13.51
Jun 11	Foreign Curr Conv Fee 491989XXXXXX6011 163404105815750	
	?MCC=5967 091000019DA	- 0.26
Jun 11	Check Crd Purchase 06/10 Wwwwonlinepublicartcom Mexico Df Mx	
	491989XXXXXX6011 163404105815750 ?MCC=5967 091000019DA	- 12.76
Jun 14	Naa Batch 5 Dan Simon	- 225.00
Jun 14	Check Crd Purchase 06/11 Rainbow Foods 1-885 Plymouth MN	
	491989XXXXXX6011 165404106899549 ?MCC=5411 091000019DA	- 26.69
Jun 15	Check Crd Purchase 06/13 Holiday Stationstore Plymouth MN	
	491989XXXXXX6011 167404104040861 ?MCC=5541 091000019DA	- 20.02
Jun 15	Check Crd Purchase 06/13 Holiday Stationstore Plymouth MN	
	491989XXXXXX6011 167404104040862 ?MCC=5541 091000019DA	- 10.64
Jun 17	Check Crd Purchase 06/16 Walgreen 00004309 Golden Valley MN	
	491989XXXXXX6011 169404105928140 ?MCC=5912 091000019DA	- 20.31
Jun 17	Check Crd Purchase 06/15 Merwin Valley Drug #7 Golden Valley MN	
	491989XXXXXX6011 169404104568439 ?MCC=5912 091000019DA	- 5.85
Jun 17	Check Crd Purchase 06/16 Usps 2663650427 Minneapolis MN	
	491989XXXXXX6011 169404106210545 ?MCC=9402 091000019DA	- 4.30
Jun 18	Check Crd Purchase 06/17 Juno Online * Svcs Wwww.Juno.Com Ca	
	491989XXXXXX6011 170404106337276 ?MCC=4814 091000019DA	- 14.95
Jun 18	Check Crd Purchase 06/16 Rainbow Foods 1-885 Plymouth MN	
	491989XXXXXX6011 170404105952571 ?MCC=5411 091000019DA	- 11.61
Jun 21	Payment To LCA # 030090382130001	- 1,000.00
Jun 21	Naa Batch 5 Dan Simon	- 225.00
Jun 21	Check Crd Purchase 06/18 Instant Hair Plus Shadow Hills Ca	
	491989XXXXXX6011 172404110747493 ?MCC=7230 091000019DA	- 52.85
Jun 21	Check Crd Purchase 06/18 Superamerica 4497 Golden Valley MN	
	491989XXXXXX6011 173404107674095 ?MCC=5541 091000019DA	- 9.55
Jun 22	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Jun 22	Check Crd Purchase 06/21 Walgreen 00004309 Golden Valley MN	
	491989XXXXXX6011 174404106058564 ?MCC=5912 091000019DA	- 32.85
Jun 22	Check Crd Purchase 06/21 pay-Friendfinder 650-8473100 Kn	
	491989XXXXXX6011 174404106998698 ?MCC=5967 091000019DA	- 12.97
Jun 23	Check Crd Purchase 06/22 Mci Local Service 800-4364444 Co	
	491989XXXXXX6011 175404102773561 ?MCC=4814 091000019DA	- 162.36
Jun 28	Naa Batch 6 Dan Simon	- 225.00
Jun 30	Prematic Corp Ins. Prem 063004 MLB08J145812 Simon, Daniel J 13	- 119.91

**Checks Paid**

Check #	Date	Amount	Check #	Date	Amount
8358	Jun 02	44.06	8361	Jun 03	200.00
8359	Jun 07	71.64	8362	Jun 04	52.15
8360	Jun 08	9.29	8363	Jun 07	22.94

\* Gap in Check Sequence

Continued on next page

000271

Account Number:  
Statement End Date:520-1014471  
06/30/04Daniel J Simon  
dba Mid-West Ins Brokers

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8364	Jun 03	400.00	8368	Jun 22	100.00
8365	Jun 16	100.00	8369	Jun 24	100.00
8366	Jun 22	117.62	8371 *	Jun 28	50.00
8367	Jun 21	100.00			

\* Gap in Check Sequence

## Daily Balance Summary

Date	Balance	Date	Balance
May 31	382.61	Jun 15	668.77
Jun 01	290.75	Jun 16	568.77
Jun 02	192.27	Jun 17	538.31
Jun 03	1,230.19	Jun 18	511.75
Jun 04	644.09	Jun 21	174.07
Jun 07	504.53	Jun 22	216.51
Jun 08	270.24	Jun 23	54.15
Jun 09	266.29	Jun 24	454.15
Jun 10	252.78	Jun 28	212.12
Jun 11	239.76	Jun 30	92.21
Jun 14	699.43		

## Activity Charge Summary For This Account

Activity	Volume	Price	Charge
FDIC Assessment Quarterly	92.21	0000	0.00
Account Maintenance W/ Chk Return	1.00	10.0000	10.00
Credits Posted	4.00	3000	1.20
Deposited Checks - Transit	1.00	0900	0.09
DDA Checks Paid	13.00	1500	1.95
ACH Received Item	13.00	0000	0.00
			13.24

Total June Activity Charge

BALANCE CREDIT: \$15 OF ACTIVITY CHARGES ARE WAIVED FOR EVERY \$1000 IN  
INVESTABLE BALANCES AVAILABLE FOR SERVICES

NET ACTIVITY CHARGE IS DEBITED

\$89,324.29 IN ADDITIONAL BALANCES WOULD HAVE WAIVED THIS ACTIVITY CHARGE

+ .06  
= 13.18

## For Your Interest

Increase your sales by as much as 25% when you provide your customers more payment options. Wells Fargo Merchant Services can help grow your business by accepting payments at your location, over the phone or through your web site. And, when you have a Wells Fargo Business Checking account, your funds may be deposited to your account as soon as the next business day. Call us at 1-866-380-9828 ext. 105 or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: merchant to find out about our credit and debit card processing solutions.

000272

WELLS FARGO BANK, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 4

1-2

4,089

Account Number:

Statement End Date:

Number of Enclosures:

(CO300)

520-1014471

07/31/04

12



DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

7/04

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	92.21	3,186.64	- 3,050.95	227.90

### News from Wells Fargo

Get up to \$100,000 cash with a BusinessLine line of credit. Use it to:

- Cover unexpected or seasonal expenses
- Supplement your cash flow while you wait for payment from others
- Invest in new space, modernize, or upgrade
- Increase profit by purchasing inventory in bulk

Plus, get quick and easy access to your line of credit with free BusinessLine checks, and online or telephone transfers to your Wells Fargo checking account. Stop by your store, call 1-800-35 WELLS ext. 210 or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: 100K, for more information.

### Active Business Checking nib 520-1014471

Daniel J Simon  
DBA Mid-West Ins Brokers

Jan 30	Beginning Balance	92.21
Jul 31	Ending Balance	227.90

### Deposits and Credits

Date	Transaction Detail	Amount
Jul 06	Continental Gen. Mo Comm DD 070104 0098219 Daniel J Simon	1,673.86
Jul 12	F+g Life Agent Pymt 040710 NAA002078 Simon Daniel	302.36
Jul 12	Deposit	106.52
Jul 14	Continental Gen. Adv Com DD 070904 0098219 Daniel J Simon	124.74
Jul 19	F+g Life Agent Pymt 040717 NAA002078 Simon Daniel	590.07
Jul 19	Deposit	309.09
Jul 26	Deposit	80.00

000273

Continued on next page



Daniel J Simon  
Dba Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
07/31/04

## Withdrawals and Debits

Date	Transaction Detail	Amount
Jul 02	Brown And Brown Payment 040630 Daniel J Simon	- 54.42
Jul 06	Client Analysis Svc Chrg 040702 Svc Chge 0604 000005201014471	- 13.18
Jul 06	Naa Batch 5 Dan Simon	- 225.00
Jul 06	Vallee D'Or Vill Payment 040706 Simon, Daniel Simon, Daniel	- 175.00
Jul 06	Check Crd Purchase 07/03 Usps 2663650427 Minneapolis MN 491989XXXXXX6011 187404103148563 ?MCC=9402 091000019DA	- 74.00
Jul 06	Check Crd Purchase 07/01 Rainbow Foods 1-885 Plymouth MN 491989XXXXXX6011 186404113293272 ?MCC=5411 091000019DA	- 29.79
Jul 06	Check Crd Purchase 07/03 Office Max 00006577 Saint Louis P MN 491989XXXXXX6011 187404103467695 ?MCC=5943 091000019DA	- 26.70
Jul 06	Check Crd Purchase 07/03 Superamerica 4497 Golden Valley MN 491989XXXXXX6011 188404103243805 ?MCC=5541 091000019DA	- 11.37
Jul 07	Blue Cross Bs MN Blue X Pay XZ2185943000 Simon, Daniel J	- 524.00
Jul 07	Check Crd Purchase 07/06 Joyce Meyer Ministries 636-349-0303 Mo 491989XXXXXX6011 189404104932696 ?MCC=5969 091000019DA	- 100.00
Jul 08	Check Crd Purchase 07/08 Callwave 188-777-2807 Ca 491989XXXXXX6011 190417100114540 ?MCC=5964 091000019DA	- 3.95
Jul 09	Check Crd Purchase 07/07 At&T Wireless Services 800-6112611 PA 491989XXXXXX6011 191404105850780 ?MCC=4814 091000019DA	- 56.64
Jul 12	Naa Batch 6 Dan Simon	- 225.00
Jul 14	Check Crd Purchase 07/12 Ontel Products Corp 800-245-0511 NJ 491989XXXXXX6011 196404103092631 ?MCC=5099 091000019DA	- 37.96
Jul 19	Naa Batch 5 Dan Simon	- 237.00
Jul 19	Check Crd Purchase 07/17 Juno Online * Svcs Www.Juno.Com Ca 491989XXXXXX6011 201404104268870 ?MCC=4814 091000019DA	- 14.95
Jul 19	Check Crd Purchase 07/18 Walgreen 00008284 Richfield MN 491989XXXXXX6011 201404107810423 ?MCC=5912 091000019DA	- 1.07
Jul 20	Check Crd Purchase 07/19 Walgreen 00004309 Golden Valley MN 491989XXXXXX6011 202404105471798 ?MCC=5912 091000019DA	- 56.70
Jul 21	Check Crd Purchase 07/18 Superamerica 4497 Golden Valley MN 491989XXXXXX6011 203404104580804 ?MCC=5541 091000019DA	- 12.32
Jul 21	Check Crd Purchase 07/20 Joyce Meyer Ministries 636-349-0303 Mo 491989XXXXXX6011 203404104966918 ?MCC=5969 091000019DA	- 6.00
Jul 22	Check Crd Purchase 07/21 CI *juno Tech Support 888-839-5866 Ny 491989XXXXXX6011 204404103557774 ?MCC=4816 091000019DA	- 27.30
Jul 22	Check Crd Purchase 07/21 CI *juno Tech Support 888-839-5866 Ny 491989XXXXXX6011 204404105234671 ?MCC=4816 091000019DA	- 21.45
Jul 22	Check Crd Purchase 07/21 CI *juno Tech Support 888-839-5866 Ny 491989XXXXXX6011 204404105234670 ?MCC=4816 091000019DA	- 13.65
Jul 23	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8370	Jul 06	100.00	8377	Jul 13	27.09
8372	Jul 07	100.00	8378	Jul 14	50.00
8373	Jul 09	58.17	8379	Jul 15	125.00
8374	Jul 13	88.70	8380	Jul 19	100.00
8375	Jul 12	22.94	8381	Jul 22	111.00
8376	Jul 08	22.98	8382	Jul 20	103.50

\* Gap in Check Sequence

## Daily Balance Summary

Date	Balance	Date	Balance
Jun 30	92.21	Jul 14	272.80
Jul 02	37.79	Jul 15	147.80
Jul 06	1,056.61	Jul 19	693.94
Jul 07	332.61	Jul 20	533.74
Jul 08	305.68	Jul 21	515.42
Jul 09	190.87	Jul 22	342.02
Jul 12	351.81	Jul 23	147.90
Jul 13	236.02	Jul 26	227.90



WELLS FARGO BANK, N.A.  
NEW HOPE OFFICE  
POST OFFICE BOX B 514  
MINNEAPOLIS, MN 55479

Page 1 of 4

3,962

Account Number:  
Statement End Date:  
Number of Enclosures:

(CO300)  
520-1014471  
08/31/04  
15

8/04



DANIEL J SIMON  
DBA MID-WEST INS BROKERS  
7527 HAROLD AVE  
GOLDEN VALLEY MN 55427-4858

If you have any questions about this statement or your accounts, call: 800-225-5935 (1-800-CALL-WELLS).

### Your Accounts at a Glance

Account Type	Beginning Balance	Deposits/ Credits	Withdrawals/ Debits	Ending Balance
Active Business Checking nib 520-1014471	227.90	4,181.22	- 4,564.99	- 155.87

### News from Wells Fargo

**FREE**, real-time access to your accounts with Wells Fargo Business Online banking. Check account balances  
view account activity - deposits, posted checks, loan details and credit card transactions - anytime,  
anywhere. Not enrolled in Wells Fargo Business Online Banking? Enroll now at [www.wellsfargo.com/biz/bankonline](http://www.wellsfargo.com/biz/bankonline)

### Active Business Checking nib 520-1014471

Daniel J Simon  
DBA Mid-West Ins Brokers

Jul 31	Beginning Balance	227.90
Aug 31	Ending Balance	- 155.87

### Deposits and Credits

Date	Transaction Detail	Amount
Aug 02	F+g Life Agent Pymt 040731 NAA002078 Simon Daniel	246.30
Aug 04	Continental Gen. Mo Comm DD 073004 0098219 Daniel J Simon	1,042.28
Aug 09	F+g Life Agent Pymt 040807 NAA002078 Simon Daniel	1,298.88
Aug 09	Deposit	150.90
Aug 13	Deposit	22.20
Aug 19	Deposit	350.00
Aug 23	F+g Life Agent Pymt 040821 NAA002078 Simon Daniel	319.13
Aug 27	Deposit	151.53

### Withdrawals and Debits

Date	Transaction Detail	Amount
Aug 02	Naa Batch 5 Dan Simon	- 230.00
Aug 02	Prematic Corp Ins. Prem 080204 MLB08J145812 Simon, Daniel J 13	- 119.91
Aug 02	Check Crd Purchase 07/29 Cub Foods #1559 St. Louis Par MN 491989XXXXX6011 213404105729783 ?MCC=5411 091000019DA	- 1.22
Aug 03	Vallee D'Or Vill Payment 040803 Simon, Daniel Simon, Daniel	- 175.00
Aug 03	Brown And Brown Payment 040801 Danielj.Simon	- 54.42

Continued on next page

000275

Daniel J Simon  
DBA Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
08/31/04

## Withdrawals and Debits

Date	Transaction Detail	Amount
Aug 04	Overdraft Fee	- 33.00
Aug 04	Overdraft Fee	- 33.00
Aug 04	Check Crd Purchase 08/02 Berkeley *4Enzyte.O 866-8341715 Oh 491989XXXXXX6011 217404104878825 ?MCC=5969 091000019DA	- 3.15
Aug 04	Check Crd Purchase 08/02 Berkeley *4Enzyte.O 866-8341715 Oh 491989XXXXXX6011 217404104878826 ?MCC=5969 091000019DA	- 1.75
Aug 05	Client Analysis Srvc Chrg 040804 Svc Chge 0704 000005201014471	- 12.93
Aug 05	Blue Cross Bs MN Blue X Pay XZ2185943000 Simon, Daniel J	- 524.00
Aug 05	Myfreemedicine.C 8059694677 080404 9261428 Daniel J Simon	- 143.95
Aug 09	Naa Batch 6 Dan Simon	- 375.00
Aug 09	Check Crd Purchase 08/08 Callwave 188-777-2807 Ca 491989XXXXXX6011 221417100906192 ?MCC=5964 091000019DA	- 3.95
Aug 11	Check Crd Purchase 08/09 AT&T Wireless Services 800-6112611 PA 491989XXXXXX6011 224404105539142 ?MCC=4814 091000019DA	- 56.80
Aug 16	Naa Batch 6 Dan Simon	- 300.00
Aug 20	Check Crd Purchase 07/06 Lakewood Church Isa #0 713-6354154 Tx 491989XXXXXX6011 233404106543482 ?MCC=8661 091000019DA	- 50.00
Aug 20	Check Crd Purchase 08/19 Benny Hinn Ministries Grapevine Tx 491989XXXXXX6011 233404104411999 ?MCC=8661 091000019DA	- 25.00
Aug 23	Naa Batch 5 Dan Simon	- 300.00
Aug 23	Life Investors Premium 34000 3400753828 Rose Ann Jones	- 194.12
Aug 23	Check Crd Purchase 08/22 Menards 3027 Golden Valley MN 491989XXXXXX6011 236404108819968 ?MCC=5200 091000019DA	- 24.83
Aug 23	Check Crd Purchase 08/21 Menards 3027 Golden Valley MN 491989XXXXXX6011 236404103798626 ?MCC=5200 091000019DA	- 9.56
Aug 23	Check Crd Purchase 08/22 Rainbow Foods 1-886 Richfield MN 491989XXXXXX6011 236404109668947 ?MCC=5411 091000019DA	- 5.00
Aug 25	Check Crd Purchase 08/23 Office Max 00006577 Saint Louis P MN 491989XXXXXX6011 238404105338599 ?MCC=5943 091000019DA	- 12.77
Aug 25	Check Crd Purchase 08/23 The Home Depot 2806 St.Louis Park MN 491989XXXXXX6011 238404104100078 ?MCC=5200 091000019DA	- 9.07
Aug 25	Check Crd Purchase 08/23 Office Depot #0295 Minnetonka MN 491989XXXXXX6011 238404103107978 ?MCC=5943 091000019DA	- 7.41
Aug 25	Check Crd Purchase 08/23 Kinko'S #0615 Minnetonka MN 491989XXXXXX6011 238404104211235 ?MCC=7338 091000019DA	- 4.79
Aug 30	Naa Batch 5 Dan Simon	- 225.00
Aug 31	Overdraft Fee	- 33.00
Aug 31	Prematic Corp Ins. Prem 083104 MLB08J145812 Simon, Daniel J 13	- 117.53

## Checks Paid

Check #	Date	Amount	Check #	Date	Amount
8384	Aug 02	100.00	8392	Aug 12	97.92
8385	Aug 06	120.00	8393	Aug 16	50.00
8386	Aug 11	430.30	8394	Aug 16	25.00
8387	Aug 09	23.70	8395	Aug 10	300.00
8388	Aug 11	77.93	8396	Aug 20	25.00
8389	Aug 05	21.63	8397	Aug 23	50.00
8390	Aug 06	63.01	8399 *	Aug 27	50.00
8391	Aug 10	44.34			
Gap in Check Sequence					

## Daily Balance Summary

Date	Balance	Date	Balance
Jul 31	227.90	Aug 11	617.27
Aug 02	23.07	Aug 12	519.35
Aug 03	- 206.35	Aug 13	541.55
Aug 04	1,365.03	Aug 16	166.55
Aug 05	662.52	Aug 19	516.55
Aug 06	479.51	Aug 20	416.55
Aug 09	1,526.64	Aug 23	152.17
Aug 10	1,182.30	Aug 25	118.13

Continued on next page

000276

Daniel J Simon  
34 Mid-West Ins BrokersAccount Number:  
Statement End Date:520-1014471  
08/31/04

## Daily Balance Summary

Date	Balance	Date	Balance
Aug 27	219.66	Aug 31	- 155.87
Aug 30	- 5.34		

## Activity Charge Summary For This Account

Activity	Volume	Price	Charge
Daily Use Of Uncoll Funds-Acct Lvl	0.08	1.0000	0.08
Account Maintenance W/ Chk Return	1.00	10.0000	10.00
Credits Posted	4.00	.3000	1.20
Deposited Checks - Transit	2.00	.0900	0.18
DDA Checks Paid	15.00	.1500	2.25
ACH Received Item	13.00	.0000	0.00

Total August Activity Charge

13.71-

BALANCE CREDIT: \$15 OF ACTIVITY CHARGES ARE WAIVED FOR EVERY \$1000 IN

INVESTABLE BALANCES AVAILABLE FOR SERVICES

+ .06

NET ACTIVITY CHARGE IS DEBITED

= 13.65

\$89,564.05 IN ADDITIONAL BALANCES WOULD HAVE WAIVED THIS ACTIVITY CHARGE

or Your Interest

increase your sales by providing your customers with more payment options. Wells Fargo Merchant Services can expand your business with our credit, debit, and ATM/online payment choices. And, when you have a Wells Fargo Business Checking account, funds may be posted to your account the next business day. Call us at 1 866 380 9828 or visit [wellsfargospecial.com](http://wellsfargospecial.com) and enter keyword: merchant to find out about our credit and debit card processing solutions.

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MINNESOTA**

-----  
In re:

BKY No. 04-41707

ADV No. 04-4\_\_\_\_\_

Daniel J. Simon,

Debtor(s).

-----  
Randall L. Seaver, Trustee

Plaintiff,

vs.

**COMPLAINT**

Daniel J. Simon,

Defendant.

-----  
Randall L. Seaver, Trustee ("Trustee") of the Bankruptcy Estate of Daniel J. Simon ("Debtor") as and for his Complaint against Daniel J. Simon ("Defendant"), states and alleges as follows:

1. Trustee is the duly appointed Chapter 7 Trustee of the bankruptcy estate of the Debtor.
2. This bankruptcy case was commenced on March 30, 2004 by the filing of a voluntary Chapter 7 petition.
3. This adversary proceeding is a core proceeding within the meaning of 28 U.S.C. §157(b)(2).
4. This court has jurisdiction over this adversary proceeding pursuant to 28 U.S.C. §§157 and 1334. This case arises under 11 U.S.C. §§541 and 542.

5. At the time the Debtor filed his bankruptcy petition, he was entitled to various first year commissions and renewal commissions on life insurance and other insurance policies sold pre-petition (“Pre-petition Policies”).

6. The Debtor’s rights to those commissions for Pre-petition Policies were not disclosed in his schedules.

7. The Debtor’s Schedule I stated that he had “Average estimated gross income” of \$1,000.

8. The Debtor’ statement of financial affairs at item 1 stated that he had 2004 income as follows: “\$2,500 2004 YTD Est. gross.”

9. In fact, the Debtor’s gross income in the January - March was at least as follows:

January	\$3,577
February	\$3,973
March	\$3,956

10. Through non-disclosure of his commission rights to Pre-petition Policies, and his false statements as to gross income at Schedule I and at Item 1 of the statement of financial affairs, the Debtor concealed his true amount of gross income and the source of that income.

11. Since the commencement of the bankruptcy proceeding through September, 2004, the Debtor received \$11,132.32 in commissions from Continental General on account of Pre-petition Policies and has turned none of those monies over to the Trustee.

12. Since the commencement of the bankruptcy proceeding through September, 2004, the Debtor received over \$7,800 in commissions from Fidelity and Guaranty Life Insurance Company which are, upon information and belief, on account of Pre-petition Policies and has turned none of those monies over to the Trustee.

13. The renewal and first year commissions for Pre-Petition Policies are property of the bankruptcy estate.

14. The Trustee seeks the judgment of the court determining that the estate is the owner of all rights to Pre-petition Policies and, ordering the Defendant to turnover to the Trustee all future renewal and first year commissions which he receives for Pre-Petition Policies, and the Trustee also seeks an order requiring Defendant to turnover to the Trustee the sum of not less than \$18,932.32, representing commissions received by the Defendant after commencement of this bankruptcy case on account of Pre-petition Policies, and entering judgment against him in the same amount.

WHEREFORE, Plaintiff respectfully requests that this Court make its Order:

1. Holding that the estate is the owner of all rights to renewal and first year commissions for all Pre-petition Policies.
2. Ordering the Defendant to turnover to the Trustee all renewal and first year commissions which he receives for pre-petition policies.
3. Ordering Defendant to turnover to the Trustee the sum of not less than \$18,932.32, representing commissions received after commencement of this bankruptcy case by the Defendant on account of Pre-petition Policies and entering judgment against him in the same amount.
4. For such other and further relief as the court deems just and equitable.

**FULLER, SEAVER & RAMETTE, P.A.**

Dated: October \_\_\_\_, 2004

By: \_\_\_\_\_  
Randall L. Seaver 152882  
12400 Portland Avenue South, Suite 132  
Burnsville, MN 55337  
(952) 890-0888

Attorneys for Plaintiff

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF MINNESOTA (MINNEAPOLIS)

## PROOF OF CLAIM

Name of Debtor  
DANIEL JOHN SIMONCase Number  
04-41707**NOTE:** This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request" for payment of an administrative expense may be filed pursuant to 11 U.S.C. §503.

Name of Creditor (The person or other entity to whom the debtor owes money or property):

Fuller, Seaver &amp; Ramette, P.A.

Name and Address where notices should be sent:

Fuller, Seaver & Ramette, P.A.  
12400 Portland Avenue South, Suite 132  
Burnsville, MN 55337☐ Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.☐ Check box if you have never received any notices from the bankruptcy court in this case.  
☐ Check box if the address differs from the address on the envelope sent to you by the court.

THIS SPACE IS FOR COURT USE ONLY

Telephone Number: (952) 890-0888

Account or other number by which creditor identifies debtor:

Check here if ☐ replaces this claim ☐ amends a previously filed claim, dated: \_\_\_\_\_**1. Basis for Claim**

- ☐
- Goods sold
- 
- ☐
- Services performed
- 
- ☐
- Money loaned
- 
- ☐
- Personal injury/wrongful death
- 
- ☐
- Taxes
- 
- ☐
- Other \_\_\_\_\_

- ☐
- Retiree benefits as defined in 11 U.S.C. §1114(a)
- 
- ☐
- Wages, salaries, and compensation (fill out below)
- 
- Last four digits of SS #: \_\_\_\_\_
- 
- ☐
- Unpaid compensation for services performed from \_\_\_\_\_ to \_\_\_\_\_ (date) (date)

**2. Date debt was incurred:****3. If court judgment, date obtained:****4. Total Amount of Claim at Time Case Filed:** \$3,227.99  
Converted (unsecured) (secured) (priority) (Total)

If all or part of your claim is secured or entitled to priority, also complete Item 5 or 7 below.

- ☐
- Check this box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all interest or additional charges.

**5. Secured Claim.**

- ☐
- Check this box if your claim is secured by collateral (including a right of setoff).

Brief Description of Collateral:

- ☐
- Real Estate
- ☐
- Motor Vehicle
- 
- ☐
- Other \_\_\_\_\_

Value of Collateral: \$ \_\_\_\_\_

Amount of arrearage and other charges at time case filed included in secured claim, if any: \$ \_\_\_\_\_

**6. Unsecured Nonpriority Claim \$3,227.99**

- ☐
- Check this box if: a) there is no collateral or lien securing your claim, or b) your claim exceeds the value of the property securing it, or if c) none or only part of your claim is entitled to priority.

**7. Unsecured Priority Claim.**

- ☐
- Check this box if you have an unsecured priority claim

Amount entitled to priority \$ \_\_\_\_\_

Specify the priority of the claim:

- ☐
- Wages, salaries, or commissions (up to \$4,925)\* earned within 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(3).
- 
- ☐
- Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4).
- 
- ☐
- Up to \$ 2,225\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6).
- 
- ☐
- Alimony, maintenance, or support owed to a spouse, former spouse, or child - 11 U.S.C. § 507(a)(7).
- 
- ☐
- Taxes or penalties owed to governmental units - 11 U.S.C. § 507(a)(8).
- 
- ☐
- Other - Specify applicable paragraph of 11 U.S.C. § 507(a)(\_\_\_\_).

\*Amounts are subject to adjustment on 4/1/07 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

**8. Credits:** The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim.**9. Supporting Documents:** Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, mortgages, security agreements, and evidence of perfection of lien. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary.**10. Date-Stamped Copy:** To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.Send original to:  
U.S. Bankruptcy Court  
301 U.S. Courthouse  
300 South Fourth Street  
Minneapolis, MN 55415

Date

10/21/04

Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any):

Randall L. Seaver

For payment send copy to:  
Chapter 13 Trustee (see notice of commencement of case for name & address of chapter 13 trustee)

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

For CHAPTER 13 CASES filed on or after April 1, 2004

\*\*The amount on the proof of claim represents attorney's fees and expenses incurred by the Chapter 7 Trustee during the course of the Debtor's Chapter 7 proceeding.